

**Second International Conference on Fermented Foods
December 17-18, 2005**

REGISTRATION FORM

Name			
Designation			
Address			
Phone:	Fax:	Email:	
Payment Details: Registration Fees INR/EURO _____ By Cash/DD No. _____ Dated _____ drawn on Bank _____			
Paper Presentation Yes/No, (Few papers will be selected for oral presentation, while all others will be presented as poster)			
Arrival:	Mode:	Date:	Time:
Departure:	Mode:	Date:	Time:
Accommodation: Required for _____ days. Category : A B C (✓Tick any one)			
Food preference Vegetarian/Non-Vegetarian			
Date:		Signature:	

The DD should be drawn in the name of “Network on Fermented Foods” payable at Anand (Gujarat) India. Send the completed form to:

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