

45th Residential Refresher Course at The Zuri White Sands, Goa

Venue: Pedda, Varca, Goa 403721

ENROLMENT FORM

Name of Member:..... Sex: M/F..... Age:.....

Firm Name:..... GSTIN:.....

Mailing Address:

Telephones: (O) Mobile: Email id:

(Kindly fill in Email address carefully and in legible writing, since all the communication from Chambers' office with regards to this conference would be only by email)

Details of Travel Schedule, if already done

Arrival at Goa on 9th June 2022

Flight No Airline Arriving at Goa atAM/PM

Train No Train Name Arriving at Goa atAM/PM

Departure from Goa on 12th June 2022

Flight No Airline Leaving from Goa atAM/PM

Train No Train Name Leaving from Goa atAM/PM

Choice of Room Partners (to be considered, only if possible)

(1)

Preference of Food (Veg/Non Veg/ Jain)

Course Material to be collected - Personallyby Courier.....

I would like to act as Group Leader for following papers:

(1)

(2)

(3)

Whether opting for extended stay from 12th March, 2022 (..... nights) : Yes/No

No of rooms required

(Charges are payable to the hotel directly)

(3) Delegate Fees:

Draft /Cheque No. Dated Drawn on

Branch for Rs. is enclosed herewith

Date: Signature.....

Notes:

1. All fields are mandatory. Kindly fill in all the fields in **BLOCK LETTERS** only
2. Double Vaccination Certificate is mandatory.
3. Furnish copy of identity proof (Any One) Aadhar Card/ Driving License/Voter's ID d/Passport/D
4. Soft copy of conference material will be emailed on email id provided.