HERBAL EXPO Oshadhi-2012

SPACE APPLICATION FORM FOR EXHIBITION

Name of the Company:
Address:
TelFax
Website
E-mail:
ContactPerson.
Designation :
Product/Services on Display:
Name of the Facia:

PARTICIPATION FEE

SHELL SCHEME:

No. of Stalls	Area in Sq. Mtrs.	Tariff
One Stall	$3m \times 3m = 9 \text{ Sq. Mtrs.}$	Rs. 10,000/-
Two Stalls	6m X 3m = 18 Sq. Mtrs.	Rs. 17,000/-
Three Stalls	9m X 3m = 27 Sq. Mtrs.	Rs. 23,000/-

Facility: Shell stalls are with three side walls, Facia Board with Company name, One Table, Two Chairs, Floor Carpet, Three Spot Lights, One Plug Point and one Dust Bin with White Cloth Ceiling.

Exhibitors need to get their own display material.

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M	in favour of "C.E.O., A.P. Medicinal & Aromatic Plants Board", payable at Hyderabad.																		
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DELEGATE REGISTRATION FORM FOR SEMINAR

Name of the Participant :
Full Address :
Tel : Mobile :
Fax :Website
E-mail:
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Present Activity:

DELEGATE FEE FOR THE SEMINAR

Registration Fee: Rs.100/- per delegate

Kindly enroll me as a delegate for the Workshop

Payment enclosed Rs
DD/Cheque (Local) No
Dt in favour of
"C.E.O., A.P. MEDICINAL & AROMATIC PLANTS BOARD",
payable at Hyderabad.

Authorized Signatory Dt:

To:

The Chief Executive Officer,

A P Medicinal & Aromatic Plants Board, 6th Floor, APGLI Building, Tilak Road,

Abids, Hyderabad -500001.

Phone: 040-40047795 Tele fax No.: 040-66364094 E-mail: apmaboard@gmail.com