

**Registration Form**  
**Fourth International Conference on**  
**Plants & Environmental Pollution (ICPEP-4)**  
**Organised by**  
**National Botanical Research Institute**  
**International Society of Environmental Botanists, Lucknow (India)**

Please attach  
recent passport  
size photograph.

Please type or fill in clearly in block letters and tick in the box (☐) wherever applicable.

To: **The Organising Secretaries, (ICPEP-4)**  
**International Society of Environmental Botanists**  
**National Botanical Research Institute**  
**Rana Pratap Marg, Lucknow-226001 (India)**

Dear Sir/Madam

I wish to attend the Fourth International Conference on Plants & Environmental Pollution (ICPEP-4) and am submitting the relevant details as below;

**Title/Salutation:** (Mr. / Ms. / Mrs. / Miss / Dr. / Prof. / Er. Etc.)

**Sex:** ☐M / ☐F

**First Name:**

**Middle Name:**

**Last Name/Surname:**

**Designation (if any):**

**Organisation/Affiliation (if any):**

**Mailing Address:**

**City, State, Postal Code:**

**Country:**

**Phone with full dialing code:**

**FAX with full dialing code:**

**E-mail:**

- ☐ I am a Foreign National/NRI and my passport details are as below;

**Nationality:**

**Passport Number:**

**Issued on:**

**Valid Till:**

**Issuing Authority:**

**Place of Issue:**

- ☐ I will be accompanied by following Persons:

(Please give full name. Foreign Nationals/NRIs to please also give full passport details as above. If needed attach duly signed extra sheet.)

1.

2.

3.

- ☐ I intend to attend the Conference and am submitting/will submit the abstract of my paper.

- ☐ I intend to attend the Conference without submitting a Paper.

- ☐ I am paying herewith the Registration Charges of Rs./US Dollars .....  
..... (Pl write the amount in figures & in words).

- ☐ The payment is being made by

☐ Electronic transfer ☐ Wire transfer ☐ Telegraphic transfer ☐ Draft No.....  
dated ..... through/drawn on..... (Name of Bank)

- ☐ I am paying/will pay concessional Registration fee by 10 October 2010.

- ☐ I will pay full registration fee on arrival, at the Registration Counter.

**Date:**

**Signature**

**Submission of this form by E-mail/FAX should be followed by signed hard copy by post.**

Pl. contact organizers, if confirmation of receipt of form is not received within 15 working days of submission.

**Phone:** +91-522-2297821 (Direct) +91-522-2205831 to 35 (PBX) extn. 821 • **Fax:** +91-522-2205836/2205839

**E-mails:** [isebnbrilko@sify.com](mailto:isebnbrilko@sify.com) / [isebmail@gmail.com](mailto:isebmail@gmail.com) • **Web Site:** <http://isebindia.com>