

**REGISTRATION FORM**

**Aircraft Structural Testing**

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Organisation : \_\_\_\_\_

Address : \_\_\_\_\_

Telephone : \_\_\_\_\_

Email : \_\_\_\_\_

No. of participants: \_\_\_\_\_

Types of delegates

Corporate  Academic/R&D/Govt.  Student

Payment details

Amount (in Rs.) : \_\_\_\_\_

DD/Ch. No. & Date : \_\_\_\_\_

Name of the Bank : \_\_\_\_\_

The DD / Cheque should be drawn in favour of “**IIAEM**” payable at Bangalore & to send before **5<sup>th</sup> Dec., 2015** to:-

Mr. Naveen S  
Aerospace Dept, IIAEM, Jain University,  
319, 17th Cross, 25th Main,  
J.P. Nagar 6th Phase, Bangalore-560078  
Ph: 080 43430400 (Extn.224), Fax: 080 26532730  
Mob: 09341324960, E: [iiem@jainuniversity.ac.in](mailto:iiem@jainuniversity.ac.in)

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