

AIRPORTS AUTHORITY OF INDIA

BOBASIO/7, BIMT/5 and ASIOACG/12 & INSPIRE/8 MEETINGS
(18-21 September 2017, New Delhi, India)

REGISTRATION FORM

1. Name in full: _____
2. Title or Official Position: _____
3. State/ Organisation: _____
4. Mailing Address: _____

5. Telephone Number: _____
Fax Number: _____
Email: _____
6. Hotel: _____

(Note: Participants are expected to make their own hotel arrangements)

7. I would be attending (Please ✓ in respective boxes)

BOBASIO/7	BIMT/5	ASIOACG/12 & INSPIRE/8

Date:

Signature: