



Registration Form

CME E Workshop at IIM Lucknow – Noida Campus

January 10th & 11th, 2019

Participants are requested to fill up the Registration Form and send a scanned copy to: cmee@iiml.ac.in

WORKSHOP TO ATTEND : (Tick any one)	
1.) Teaching Marketing Research	
2.) Practicing Marketing Research	

TRANSACTION DETAILS:	
MODE: (DD/Online)	
UTR NO./Reference. No.:	
AMOUNT PAID:	
DISCOUNT AVAILED (IF ANY)	
DATE OF TRANSACTION:	
A/c NAME:	
BANK AND BRANCH NAME:	

PERSONAL INFORMATION:	
FULL NAME	
e-Mail ID:	
MOBILE No.	
ORGANIZATION	
DESIGNATION	
ADDRESS FOR COMMUNICATION WITH PIN/ZIP CODE	
TELEPHONE NOS. (Office, Res.)	

Signature:

Date: