

Registration Form

1. Date of Training Programme interested in : _____
2. Personal Details
- a) Full name of Participant (Mr./Mrs./Miss.) : _____
- b) Organisation : _____
- c) Designation/Qualification : _____
- d) Present Address : _____

- e) Permanent Address : _____

- f) Contact Tele. No./Fax No./Mobile No./Email ID/ : _____

3. Payment Details Rs. : _____
- DD Number : _____
- Name of Bank and Branch : _____

The above filled form shall be sent at the earliest to:

National Institute for Intellectual Property Management (NIIPM)
Government of India - Ministry of Commerce & Industry
CGO complex, C Block, Seminary Hills, Near TV Tower, Nagpur, Maharashtra - 440006
Email: niiipm.ipo@nic.in, niipmnagpur@yahoo.com, pisnagpur1@yahoo.com, ipti-mh@nic.in
Ph:- 91 (0712) 2511380 / 2510535 / 2510088
Fax: 91 (0712) 2510186 / 2512040
Visit us at www.ipindia.nic.in **Office Timing 9.30 Am to 6 Pm (Monday to Friday)**