

REGISTRATION FORM

ADVOC JOINT CONFERENCE 2017

1st to 5th NOV 2017

◆ Delegate Details

Name of Law Firm

City and Country

Delegate First Name Male Female

Delegate Last Name

Nationality & Passport No

Correspondence Address

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Contact Details

Email Mobile

Telephone Fax

Dietary Restrictions, if any:

JAIPUR Arrival Date* Flight Details

JAIPUR Departure Date* Flight Details

* If not available presently, please inform details as soon as possible via email on

advoc2017@dlco.in and advoc2017@ambholidays.com

◆ Companion Details

Companion First Name Male Female

Companion Last Name

Nationality & Passport No

Correspondence Address

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CONTD..



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Advocates, Solicitors & Notary
Established In 1957



REGISTRATION FORM

Companion Contact Details

Email Mobile

Telephone Fax

Dietary Restrictions, if any:

If under 18, please indicate age:

If more than one companion, please fill another form.

◆ JAI MAHAL PALACE HOTEL

Check In Check Out

◆ Pre and Post Conference Activities Registration:

PRE EVENT OPTION 01 Yes / No Delegate Name:

1st Nov 2017 (Wed)

Companion Name:

Golf Session

PRE EVENT OPTION 02 Yes / No Delegate Name:

1st Nov 2017 (Wed)

Companion Name:

Pushkar Fair

For the Pre-Event Options, Delegates and Companions must arrive in Jaipur by 31st October, 2017

POST EVENT OPTION Yes / No Delegate Name:

5th Nov (Sun) -

6th Nov (Mon) 2017

Companion Name:

Visit to the Taj Mahal

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◆ PAYMENT DETAILS

Please complete calculation to show total amount to be remitted.

Sr. No	Particulars	Amount	Amount to be remitted
1.	Conference Registration Fee Per Delegate	\$ 1700 / \$ 1600*	
2.	Conference Registration Fee Per Companion	\$ 1600 / \$ 1500*	
3.	Additional Fee for Pre-Event Activities Option 01 Per Person	\$ 180	
4.	Additional Fee for Pre-Event Activities Option 02 Per Person	\$ 125	
5.	Additional Fee for Post-Event Activity Per Person	\$ 500 / \$ 450**	
6.	Bank Charges/Transfer Fees	\$ 30	\$ 30
	Total Amount Remitted		

* Early bird discount for those registrations received before 30th April, 2017

** \$ 500 on single occupancy and \$ 450 on twin sharing basis.

Wire Transfer Details	Beneficiary Name	Ambassador Express Holidays Private Limited
	Beneficiary Bank Name	South Indian Bank Ltd.
	Beneficiary Bank Branch	Nariman Point, Mumbai – 400 021
	Beneficiary A/c No.	0194083000001421
	SWIFT Code	SOININ55194

Delegate Signature Date

ADDITIONAL INFORMATION/REQUIREMENTS, IF ANY.

Please fill the above necessary information, print sign and email the form to advoc2017@dlco.in and advoc2017@ambholidays.com



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