

**National Integrated Workshop
on**

Tax Practice

Organised by

**Pacific Institute of Management, Udaipur and
Western India Regional Council of
The Institute of Chartered Accountants of India, Mumbai**

REGISTRATION FORM

Name: _____

Designation/occupation: _____

Address: _____

E-mail: _____ Tel: _____

Qualifications: _____

Name of co-applicants in case of availing Special Package

1. _____ 2. _____

3. _____ 4. _____

Registration Fee: Rs. _____ Cash/Cheque/D.D. No. _____

Completed Registration Form should reach at the address given down below latest by 5th March,

2009.

Place:

Date:

Signature of Applicant

Pacific Hills, Pratap Nagar Extension, Airport Road, Udaipur – 313003

Phone: 0294- 2494506-507, 2494512

Email: director@pimanagement.org .