



A) DELEGATE DETAILS

DELEGATE 1

Tel:

□ Dr □ Mr □ Mrs □ Ms □ Miss Surname: □ First Name:	Registration Confirmation and Other Details
Job Title:	Please send your registration to:
E-mail: Tel:	Indian Television Dot Com Pvt Ltd. C-350, Oshiwara Industrial Centre, Opp Oshiwara Bus Depot, New Link Rd, Goregaon West, Mumbai - 400104, India
DELEGATE 2 Dr Mr Mrs Ms Miss	Tel: 91-22-66424000 Fax: 91-22-28767791
Surname: First Name:	Apurva Pawar Mob: 91-9892479390
Job Title:	Email:sportlight.delegates@indiantelevision.co.in
E-mail: Tel:	
	*To register for more than 2 delegates please fill a new form.
B) ORGANISATION DETAILS	
Organisation Name:	
Industry:	
Address:	
City:	State:
Postal / Zip Code:	Country:
Primary Contact Person:	
Email:	

Fax:

Please fill the details scan & email OR Fax to +91-22-28767791 \prime + 91-22-66424047



Summit Venue

PALLADIUM HOTEL

462, Senapati Bapat Marg, Lower Parel, Mumbai, Maharashtra 400013