

PLANNER-2004
INFLIBNET Centre
REGISTRATION FORM

Content Creation, Access and Management in Networked Environment

Date: November 4-5, 2004

Venue: Manipur University, Canchipur

A) Name: Mr./Ms./Mrs./Prof./Dr. _____
 (Surname first)
 Designation: _____
 Organisation: _____
 Address: _____

Place: _____ PIN: _____ E-Mail: _____
 Tel.No: (O) _____ (R) _____ Area Code: _____ Fax: _____

B) Interested in Tutorial: **Yes/No**, _____ If yes, Please opt **a/b**
 (a) *Developing Digital Libraries using Greenstone DL Software.*
 (b) *Networking and Security Issues.*

C) Accommodation required: **Yes/No** _____ Self/Accompanying person/s
(Please indicate the number of accompanying persons, if any)

D) Traveling Details, may be sent to the Organising Secretary as soon as finalized

	Date	Time	Mode
Arrival			Air/Train/Bus
Return			Air/Train/Bus

E) Registration Fee Structure (Select the appropriate) *(Fees in Rs.)*

Option	General				College Librarians/Students/ Retired Library Professionals			
	I	II	III	IV	V	VI	VII	VIII
A	500.00	500.00	500.00	500.00	300.00	300.00	300.00	300.00
B	100.00	--	100.00	--	100.00	--	100.00	--
C	300.00	300.00	--	--	300.00	300.00	--	--
TOTAL (A+B+C)	900.00	800.00	600.00	500.00	700.00	600.00	400.00	300.00

A – Conference, B - Tutorial, C - Accommodation advance

Kindly make the Demand Draft in favour of **Organising Secretary, PLANNER – 2004**. D.D. should be drawn on nationalized banks only.

Details of the D.D.:

Name of the Bank: _____ Branch: _____
 Draft No.: _____ Date: _____ Amount: _____

Date:

Place:

Signature

Please mail the completed registration form not later than **September 18, 2004** to:

Sh. Ch. Radheshyam Singh
Organising Secretary, PLANNER – 2004
 University Librarian
 Manipur University, Canchipur
 Imphal – 795 003 (Manipur)
 Tel.No.: 0385-2435098, 2435046(O) 2435144(R)
 Fax: 0385-2435145 E-mail : mulibry@sancharnet.in