



Registration form

**Indian Pharmaceutical Association, Anand Local Branch
& Anand Pharmacy College, Anand**



56th National Pharmacy Week
“Know your medicines: Ask your Pharmacist”
29th January, 2018
as
Festa Farmaceutica' 2018

Full name: _____

Name of Institution: _____

B.Pharm: 1st Year

M. Pharm: 1st Year

2nd Year

2nd Year

3rd Year

4th Year

Availing IPA membership: Yes / No. If Yes, Membership no.: _____

Events you would like to participate in (Make ✓ sign)

- Handmade poster:
- Pharma Poem:
- Pharma documentary:
- Pharma toons:
- Elocution:
- Myself medicine:

Registration Fees Paid:

For IPA Members: Rs. 100/-

For Others: Rs. 150/-

Date:

Signature of Participant: