



# INDIAN INSTITUTE OF INSURANCE SURVEYORS & LOSS ASSESSORS

“Promoted by IRDA: Govt of India”

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DELEGATE REGISTRATION FORM FOR TECHNICAL TRAINING / WORKSHOP / SEMINAR							
Place of technical training/ workshop/ seminar to be attended						Affix Latest Photograph	
Date of Programme							
<b>TO BE FILLED IN CAPITAL LETTER</b>							
NAME OF DELEGATE							
ADDRESS OF DELEGATE							
SURVEYOR LICENCE NO				VALIDITY			
IIISLA MEMBERSHIP NO							
DISCIPLINE TECHNICAL TRAINING / WORKSHOP / SEMINAR		Tick Mark <input checked="" type="checkbox"/>	Motor		Non Motor		
CONTACT DETAILS		Tel/Mob. No		Mob. No.			
E-Mail ID							
DELEGATE FEE		Rs					
Mode of Delegate Fee Payment		Tick Mark <input checked="" type="checkbox"/>	Cash		Cheque		Demand Draft
<b>IF payment is through cheque - Details of cheque</b>							
Cheque No		Cheque Date		Drawn On (Bank Name)			
<b>IF payment is through demand draft - Details of draft</b>							
Draft No		Draft Date		Drawn On (Bank Name)			
Place							
Date		Signature of Delegate					