

REPLY FORM

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**Seminar on “Recycling of Vehicles”**

5<sup>th</sup> August 2010 : Casurina Hall, India Habitat Centre  
Lodi Road, New Delhi – 110 003

Organization: \_\_\_\_\_

Our organization would be represented by:

<b>S. No.</b>	<b>Name</b>	<b>Designation</b>	<b>Email</b>

Contact Person:

Name: \_\_\_\_\_ Designation: \_\_\_\_\_

Address: \_\_\_\_\_

Tel & Mob: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_