

Date : _____

Please register the following for participation in the WICMA Symposium 2025

Please indicate with a tick (✓) Member/Spouse Other Corrugators Guests

| Sr. No | Name | Category* | Age** |
|--------|------|-----------|-------|
| | | | |
| | | | |
| | | | |

* Participant / Spouse / Child
** Age to be mentioned only
for child less than 12 years

Registration of participants on first-come-first-served basis. Registration with Hotel booking must be received with payment by 15th Aug 2025 thereafter Spot registration rates will apply and registration and room booking will be on the basis of availability. Registration fees once paid, will not be refunded. Refund of Hotel fees will be considered on case-to-case basis.

Kindly arrange to reserve Hotel accommodation as per details given below:

Check-in 18th Sept 19th Sept Check-out 20th Sept 21st Sept

| Sr. No | Name of Occupant | Identity Proof (Please mention no.) |
|--------|------------------|-------------------------------------|
| | | |
| | | |

- Aadhar Card / Voter ID / Passport copy – Please submit anyone of these along with the form.
- Hotel booking will be confirmed only after receiving Symposium Registration. Form, payment and Identity proof must be sent to WICMA Office before 15th Aug 2025. Requests received after 15th Aug 2025 will be subject to availability.

| Tariff | | | | |
|--|---------------------------------|-------------------|-------------------------------|----------------|
| Registration Fees (incl. of GST @ 18%) | | | | |
| | | Member / Spouse : | Non-member Corrugators | Other Guests : |
| Regular | up to 15 th Aug 2025 | Rs. 3540/- | Rs. 9440/- | Rs. 23600/- |
| Spot | from 16 th Aug 2025 | Rs. 9440/- | Rs. 23600/- | Rs. 23600/- |
| Hyatt Place Room Charges (per room – per night Inclusive of taxes) | | | | |
| Single / Double Occupancy: Rs. 8260/- | | | Triple Occupancy: Rs. 10030/- | |

| | | |
|--------------------------|---------------------|---------|
| Name of the Organisation | | |
| GST No | | |
| Address: | | |
| Cell No (s):* | | |
| Email Id: | | |
| Total Payment Amt | | |
| For Registration : | For Hotel Booking : | Total : |
| Rs. | Rs. | Rs. |

*Please note that cell number(s) will be included in Symposium 2025 WhatsApp Group for regular notifications regarding the Symposium.

| Payment information for Regn & Room Booking | | Bank Details | |
|--|--|--------------|--|
| Payment Amt | | Name | Western India Corrugated Box Mfrs. Association |
| Transaction Info | | Bank | Bank of Baroda, Sakinaka Branch |
| | | A/c Type | Current |
| | | A/c No | 04120200000021 |
| Please mention cheque / UTR / IMPS / UPI Ref Nos, Date , Bank & Branch details | | IFSC | BARBOSAKINA |



Scan to Pay

Signature

Synchronizing Event



WESTERN INDIA CORRUGATED BOX MANUFACTURERS' ASSOCIATION
138, Mittal Estate No. 3, M. Vasanti Road, Andheri (E), Mumbai - 400 059.
Phone: +91 22 2850 8716 | Cell: +91 91 86554 85791
Email: wicmasymposium@gmail.com Website: wicma.com

