

The Indian Chapter of



(International Society of Lyophilization -Freeze Drying, Inc.)

www.islyophilization.org

Pleased to invite you for the workshop on
“Freeze Drying Technology”

conducted by

Dr. Thomas A. Jennings, President – ISL-FD Inc.,

Invited

Ms. Anne Johnson, Compliance Officer,
ORA/ Office of the Enforcement, Food and Drug Administration,
Rocville, MD, USA has been requested to join the workshop
to make a presentation on

“Lyophilization Processes: A Compliance/Enforcement Perspective”

Venue	:	The Golden Palms Hotel & Spa, Bangalore
Date	:	November 19-20, '05
Registration Charges	:	Rs. 27,550/- per person (Inclusive of 10.2% Service Tax) For Two persons (room on twin sharing basis) Rs. 22,040/- per person (Inclusive of 10.2% Service Tax)
Registration fee includes, two nights stay (Nov. 18 & 19) at Golden Palms Hotel & Spa ; break fast, lunch and dinner.		

To make the workshop useful for everyone, the attendees should have experience in Freeze Dryers and to restrict maximum 2 members per company.

Please send the enclosed registration form duly filled in along with the payment

Registration Form

Workshop on the : **FREEZE DRYING TECHNOLOGY**

Conducted by : **Dr. Thomas A. Jennings,**
President,
International Society of Lyophilization – Freeze Drying Inc.,
Bala Cynwyd, PA 19004, USA

Date : **November 19 – 20, '05**

Venue : **The Golden Palms Hotel & Spa, Bangalore**

Registration Fee : **Rs. 27,550/-** for one person (Inclusive of 10.2% Service Tax)
Team Discount **Rs. 22,040/-** each for two persons (Inclusive of 10.2% Service Tax)
on 'room twin-sharing basis'

Make DD/ Cheques (at par) payable at Chennai in favour of '**Indian Chapter of International Society of Lyophilization – Freeze Drying, Inc**'. to be couriered to,

Mrs. Amirtha Vasudevann
Indian Chapter of ISL-FD,
C/o.SPINCO BIOTECH PVT LTD,
No.4 Vaidyaram Street, T.Nagar,
Chennai - 600 017

Name (Dr. / Mr. / Mrs. / Ms.) : _____
(Surname) (First) (Middle)

Designation : _____

Organization : _____

Address of correspondence : _____

_____ | _____ | _____
City Pin State

_____ | _____ | _____ | _____
Phone (board) Phone (direct) Fax Mobile

E-mail : _____

Experience in Freeze Drying Technology : _____

Areas of Interest : _____

Terms and Conditions

1. Registration fee includes two nights stay (arrival on Nov. 18 evening and departure on Nov. 20, evening), break fast, lunch and dinner.
2. Those who attend to have experience in Freeze Dryers preferably Production Model.
3. Registration is restricted to two per company