 **A short Course on Urbanization and Health**

**REGISTRATION FORM**

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| **PLEASE WRITE IN CAPITAL LETTERS****Name :** …………………………………………………………………**Gender : Male ☐ Female ☐** **Qualification :** …………………………………………………………………**Mobile no. :** …………………………………………………………………**Email ID :** …………………………………………………………………..**Institution / Organization :** …………………..…………………………………….**Address for communication:** …………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………… | **Why do you wish to attend this course?** ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………☐ Self - financing ☐ Sponsored by organization / company If sponsored for the course, please send a letter of agreement from your sponsor as soon as possible.  |

**Registration Form and Payment details should be sent to**

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