 **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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