



ISO 9001:2015

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## Hands-on Training Workshop on Cell Culture Techniques

Register Number:  
(Office Use)

Affix Passport  
Size Recent  
Photograph

Name: Mr. /Ms.....

Course of Study .....

Organization:.....

Name of the Supervisor : Dr. / Mr. / Mrs/Ms. / Prof.:.....

Contacts: Cell: .....E-mail: .....

Address for Communication: .....

Hands on Training Fee: Rs. **5,000/**

i) Cash [ ] ii) DD [ ] iii) ECS [ ] iv) Challan [ ]

| Date of payment  | Mode of Payment with details | Amount paid | Receivers signature |
|------------------|------------------------------|-------------|---------------------|
|                  |                              |             |                     |
| <b>Total Rs.</b> |                              |             |                     |

Payment should be made via Demand Draft in favour of “Avanzbiopvtltd” payable at **Chennai**. Demand Draft (D.D) must be sent to the following address: **The Director, Avanz Bio Pvt Ltd, No. 12 M.E.S Road, East Tambaram, Chennai -600059.**

Place:

Date:

Signature of the Candidate

**Hands on training for:** UG/PG/PhD students, faculty, scientists as well as people working in industry in the field of Life Sciences, Medical Sciences, Pharmaceutical Sciences and Chemical Sciences areas