

REGISTRATION FORM

Date: _____

The Secretary
Cotton Association of India,
Cotton Exchange Building, 2nd Floor,
Cotton Green, Mumbai – 400 033.
Tel. No.: +91 022 20830685 / +91 8657442944-48
Email: cai@caionline.in

Dear Sir,

“Cotton - Quality Assessment & Marketing in Present Scenario”

We are one of your members* / non-members*. We have pleasure in deputing the following delegate/s for the above Programme to be held on **17th September 2025 to 19th September 2025 in Cotton Association of India, Cotton Green, Mumbai 400033**. The particulars of the participant/s are as follows:-

1. Name of the Participant/s

(a) Mr./Mrs./Miss. _____

(b) Mr./Mrs./Miss. _____

2. Designation/s

(a)

(b)

3. Name of the Organisation _____

4. Address: _____

5. Tel. No.: _____ **Mobile:** _____

Email: _____

*We have paid Rs. _____ being fees for this programme by NEFT / RTGS

Title	:	Cotton Association of India
Name of Bank	:	Union Bank of India
Branch Address	:	Cotton Green (East)
Account Type	:	Savings Account
Account No.	:	31650 2010 993943
IFSC Code	:	UBIN0531651

vide Unique Transaction Reference (UTR) No. _____.

*Please find enclosed cash/cheque payable at Mumbai drawn in favour of COTTON ASSOCIATION OF INDIA for Rs. _____ towards Registration Fees for _____ participant/s.

Thanking you,

Yours faithfully,

(Signature and Rubber Stamp)

* *Strike out whichever is not applicable*