

ICPST-2019 (17-19 January 2019)

Organized by:  
Department of Physics,  
Deshbandhu College, Kalkaji, New Delhi

For Office Use only

Accommodation provided in.....

**Venue:** University Conference Hall, University of Delhi, New Delhi

## ACCOMMODATION FORM

1. **Accommodation Type** (Hotel/Guest House/Hostel).....

2. Whether Accompanying Person (s) (Yes/No).....

3. No. of Days of Stay:.....

4. From ...../01/2019. Expected Time of Check in .....

To ...../01/2019. Expected Time of Check out .....

5. Name: **Dr./Mr./Ms.** .....Gender(M/F).....**Age**.....

Designation.....

Affiliation .....

.....

**Country**.....**City**.....

Whether **Invited Speaker/Oral** or **Poster** Presenter/ **Participant** only.....

### INFORMATION OF ACCOMPANYING PERSON

Number of Accompanying Person(s).....

| S.No. | Name of Accompanying Person | Gender (M/F) | Age | Relationship with Speaker/Presenter | Whether Accompanying person is Invited speaker/ Oral or Poster Presenter/ Participant only/None |
|-------|-----------------------------|--------------|-----|-------------------------------------|---|
|       |                             |              |     |                                     |   |
|       |                             |              |     |                                     |   |
|       |                             |              |     |                                     |   |

I, declare that the above information is given by me and is true. I, also, agree to pay the accommodation charges.

Signature.....

Date:.....

Name.....

**Note:** The availability of accommodation is based on first come first served. For more details kindly visit Conference website [www.icpst2019.com](http://www.icpst2019.com)