

INTERNATIONAL CONFERENCE ON
MODERN TRENDS IN CHEMICAL SCIENCES INCLUDING GREEN CHEMISTRY

ORGANIZED BY

RASAYAN JOURNAL OF CHEMISTRY,
SRM INSTITUTE OF SCIENCE AND TECHNOLOGY
RAMAPURAM CAMPUS, CHENNAI



&
ASSOCIATION OF CHEMISTRY TEACHERS

Accommodation Form

This form filled in and signed together with appropriate remittance for
Registration must reach to Dr. Helen P. Kavitha, Convener,
MTCSGC-2018, SRM Institute of Science and Technology,
Ramapuram Campus, Chennai-600089.
Phone: +91 44 3060 3038
E-mail: mtcsgc2018@gmail.com

(Please use capital letters)

Name _____

Designation _____ Age _____ Sex _____

Name of the Institution / College _____

Address _____

City _____ State _____ Pin code _____ Country _____

Fax _____ Mobile No _____ E-mail _____

I am enclosing a sum of _____ (Rupees _____)

by Cheque / Demand Draft / NEFT Transaction No. _____ dated _____

drawn in favour of SRMIST payable at Chennai.

Hotel Details

Accommodation Venue	US Dollars (\$)		Indian Rupees		Distance from Conference Venue
	Single Occupancy	Double Occupancy	Single Occupancy	Double Occupancy	
Feathers, A Radha Hotel, Ramapuram	177	193	11,500	12,500	2.1 Km
Lemon Tree Hotel, Ramapuram	170	170	11,000	11,000	2.1 Km
Green Park, Vadapalani	108	123	7,000	8,000	5.2 Km
Hotel Chennai Le Palace, Porur	54	61.5	3,500	4,000	3.0 Km
Grand Residency, Porur	48	61.5	3,100	4,000	3.0 Km
Hotel Checkers, Saidapet	46	54	3,000	3,500	6.2 Km
S.R. Ashwin Residency, Ramapuram	21	26	1,350	1,700	1.5 Km
Jaya Residency, Valasaravakkam	16	23	1000	1500	2.5 Km

Remittance / Write Transfer Details / Demand Draft (DD) Details

Name of Account: SRMIST Account No. : 117109000032971

Name of Bank & Address: CITY UNION BANK, Bharathi salai,
Ramapuram, Chennai-89

Registration and accommodation charges can also be paid in the
form of DD/Multi city cheque to be drawn in favor of "SRMIST",
payable at Chennai.

RTGS / NEFT / IFSC: CIUB0000517

Quoting Purpose of Fund: MTCSGC-2018 Accommodation fees of
(Name of delegate)

Hotel Booking Details

Hotel Name _____

Room Type Single/ Double _____

Check in date _____ Check out date _____

No of persons _____ No of nights _____

Total hotel charges _____

Signature _____