



Ist KALRO Scientific Conference and Exhibition Registration Form

Prof./Dr/Mrs./Ms./Mr

Surname:Initials:First Name:.....

Address:

Telephone No:Cell:

Email:Skype:.....

Organization:

I wish to attend the Ist KALRO Scientific Conference and Exhibition and enclose payment for registration as indicated below:

	Early	Late	Early	Late
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scientists	KES 10,000	KES 15,000	Students KES 5,000	KES 6,000
	USD\$100	USD\$150	Students USD\$ 50	USD\$ 60

Please return this form together with remittance to:

The Secretariat, Ist KALRO Scientific Conference and Exhibition, P.O. Box 57811-00200 City Square, Nairobi, Kenya

Tel: +254-722-206-986; +254-733-333-223; **Email:** KALROConference2019@kalro.org; KALROConference2019@gmail.com

Conference website: <http://www.kalro.org/kalroconference>

All cheques to be paid to KALRO Scientific Conference and Exhibition; or deposited to Kenya Commercial Bank (KCB), Branch: KICC, Account Name: KALRO Biennial Scientific Conference; Account number: 1102289256; Bank Code: 01104; SWIFT Code: KCBLKENX

Registration deadline 31st May 2019 (for Early Registration) any date after is considered late