



ISMN Nutrition for Health Summit 2023

Stall Booking form

BusinessorOrganizationName: _____

ContactName: _____ Phone: _____

Email: _____ Website: _____

APPLY FOR ISMN BEST FOOD SAFETY AND HYGINE/ BEST FOOD MENU AWARD 2023

ProductorServiceCategory (pleaseselectallthatapply)

- Food product Service Education Retail Sales HealthCare Treatment
 Farm Garden Youth Restaurant Personal Services Information

Please describe yourboothandservice _____

Booth Options (pleasemarkyourselection):

- | | |
|---|-------------|
| <input type="checkbox"/> Nonprofit Tabling (single table unmanned-no electric) (Women Start up) | Rs 3,000 |
| <input type="checkbox"/> 8x10StandardBooth (no electricity) (New startup) | Rs 6,000 |
| <input type="checkbox"/> 8x10StandardBooth(withelectricity) (Brands) | Rs 15,000 |
| <input type="checkbox"/> Gifting | as actual |
| <input type="checkbox"/> Branding | Rs 1,10,000 |
| <input type="checkbox"/> Sponsorship | Rs 5,00,000 |

Name of Account: International society for medical food and Nutrition

Bank details: Account No: 7549080823

Bank Name: INDIAN BANK, KGMU LUCKNOW 226003

IFSC Code: IDIB000K656

MytotalBoothSpaceReservation:

Booth _____

Adspace _____

Total Due _____

Submitting this application does not guarantee vendor space. Confirmation will follow. There are limited spaces available for each booth and type of vendor. By signing below, you verify that you are the responsible party for this vendor and ourcontactforplanningand follow-up.Checkswillnotbe cashed beforevendorisapproved.

Signature: _____ Date: _____

PleasemailthisapplicationwithTransaction details at Questions? Call 7068040221

Email completed form to
ismanutrition@gmail.com/ismnfh@gmail.com