

**INTERNATIONAL SYMPOSIUM ON  
“WATER QUALITY AND HUMAN HEALTH: CHALLENGES AHEAD”  
KANDY, SRI LANKA; 22 – 23 MARCH 2012**

**Postgraduate Institute of Science (PGIS), University of Peradeniya  
Sri Lanka**

**SYMPOSIUM REGISTRATION (for Foreign Participants - Deadline: March 15, 2012)**

Please return the completed and signed form with payment in one of the following ways:

- (a) **First Class Airmail:** Director, Postgraduate Institute of Science (PGIS), University of Peradeniya, P O Box 25, Peradeniya, Sri Lanka
- (b) **Fax:** Director, PGIS, Fax Number: +94 81 2389026 (Sri Lanka)

**Inquiries:** Please contact **Symposium Coordinator,**

**Dr. S. K. Yatigammana**, Department of Zoology,  
University of Peradeniya, Peradeniya  
Sri Lanka

(Phone: 0812394479, 0715328086, E-mail: [sudharma\\_y@yahoo.com](mailto:sudharma_y@yahoo.com))

**REGISTRATION FEES**

Foreign Participants	Before 1 <sup>st</sup> March 2012	After 1 <sup>st</sup> March 2012
SAARC Countries	USD 200	USD 300
Other Countries	USD 300	USD 400

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**Registration Form - Foreign Participants**

**SECTION A - PERSONAL DETAILS**

Please Tick   Prof.  Dr.  Mr.  Ms. Gender:  Male  Female

Family Name/Last Name: .....

First Name/Given Name: ..... Middle Initial(s): .....

1. Institute/University/Organization: .....

Address: .....

City: ..... Country: ..... E-Mail address: .....

Telephone: ..... Fax: .....  
(Country Code/City Code/Number) (Country Code/City Code/Number)

2. Home Address (Optional): .....

**SECTION B - PAYMENT DETAILS**

Type of payment:  Visa  MasterCard  Bank Draft \*

(\*Personal cheques are not accepted. Bank Drafts should be drawn in favour of **"Postgraduate Institute of Science"** and sent by registered airmail or courier.)

Credit Cardholder's Name (as it appears in the card): .....

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Card Expiry Date (mm/yy)  /

I hereby authorize the Postgraduate Institute of Science (PGIS), to charge the amount of US\$ .....

.....  
Cardholder's Signature

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