



**PROCESS DEVELOPMENT DIVISION-FOOD UNIT
REGISTRATION FORM
NATURAL JUICE PROCESSING WORKSHOP**

NOVEMBER 23 – 25, 2011

Company: _____

Address: _____

Tel Number: _____ Fax Number: _____

E-mail: _____

Name of participant(s): 1. _____
2. _____

**Workshop fee JA\$28,000 per person inclusive of a Registration fee of \$500.
Payment due by November 15, 2011.**
(If payment is by cheque, please make it payable to the Scientific Research Council)

Enclosed cheque # _____ in the sum of
_____ for _____ participant (s).

Signature

Date