

# E-SUBSCRIPTION FORM

Name of the subscriber:.....Gender (F)/(M).....

Address:.....

Post Box:.....Mobile:.....Tele:.....Fax:.....

E-mail:.....

Cover Price Nu. 10/- per issue.

<b>1 YEAR (53 ISSUES)</b> <b>Nu. 300/-</b>	<b>2 YEARS (106 ISSUES)</b> <b>Nu. 570/-</b>	<b>REMARKS</b>
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Subscription starting from.....expired on.....

Mode of Payment: cash/cheque/DD/CW No.....date:.....

Cash memo/Bill No./Receipt No.....date:.....

**Signature of the Subscriber**

**Department of Circulation**