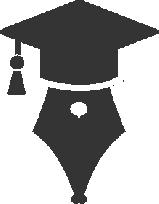
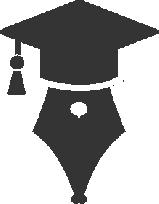
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Name of Organization/Institution/Individual  …………………………………………………………………  Mob. No. …………………………………………………..  Email ……………………………………………………….  Subscription Year ………………….…………………..  Any Additional Information ………………………...  ………………………………………………………………… | **SUBSCRIPTION TARIFF** | | | | | | **Particulars** | | **Duration of Subscription** | **Price** | **Tick in Application Box** | | **Journal of Hospital Pharmacy**  **(Print+Online)** | | 1 Year | **2,410 Rupees** |  | | 3 Years | **6,900 Rupees** |  | | **Experimental Pharmacology Series (Ex-Pharm Series) Software** | | 1 Year | **4,970 Rupees**  (Basic Pack-for 10 experiment)  (450 Rupee for each add. Exp.) |  | | 3 Years | **12,390 Rupees**  (Basic Pack-for 10 experiment)  (1150 Rupee for each add. Exp.) |  | | **Software EWL – (Software for – English word’s worth-learning language lab)** | | 1 Year | **7,790 Rupees** |  | | **ACCOUNT DETAILS** | 3 Years | **19,800 Rupees** |  | | **Name of A/C Holder: Health Education Bureau**  **Name of the Bank: UCO Bank**  **Account Number:20960210003121**  **IFSC code: UCBA0002096**  **MICR Code:302028023**  **Bank Branch Name & Code: Mansarovar, Jaipur**  **Branch Code:002096**  **District & State: Jaipur, Rajasthan** | **Digi-Frog**  **Software** | | 1 Year | **1,400 Rupees**  (For any one animal) |  | | 1 Year | **4,250 Rupees**  (For any six animals)  707 Rupees for each additional animal |  | |  | **Plag-Check**  **Software (Regular)** | Unlimited | **9,790 Rupees**  (For total 50,000 pages\*) |  | | **Plag-Check**  **\*For each file Max. Page limit is 100.**  **Software (Advance)** | Unlimited | **18,000 Rupees**  (For total 1,00,000 pages\*) |  | | **Plag-Check**  **Software (Ultra- Advance)** | Unlimited | **45,900 Rupees**  (For total 2,50,000 pages\*) |  | | **(18% GST will be applicable On all products excluding “Journal of Hospital Pharmacy”)** | | | | |   I/WE WANT TO SUBSCRIBE BELOW MENTIONED PRODUCT, PLEASE ACCEPT MY/OUR SUBSCRIPTION APPLICATION WITH FOLLOWING PARTICULARS  I/We Hereby Enclose the Demand Draft/Cheque/NEFT/RTGS/Online Transaction No. ………………….…………………… of Rupees..…….…..……………………………Dated……………….…………..…………Bank & Branch Name…………….………………………….. ……………………………………….………………………... in favor of “**Health Education Bureau**” Payable a Jaipur.   |  | | --- | | **Address of Subscribing Organization/Institute/Individual**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City: District: State: Pin Code: |   Date:  Place: Signature: |
| **PLEASE SEND US THE FILLED FORM WITH REQUISITE FEES AT FOLLOWING ADDRESS** |
| Address: **HEALTH EDUCATION BUREAU**  **55/20, Rajat Path, Mansarovar,**  **Jaipur, Rajasthan, India, Pin :302020**  **Contact: 0141-2783681, 07976447983, 09636348191**  **E-Mail: support@heb-nic.in, serviceheb@gmail.com**  **Website: www.heb-nic.in, www.journalofhospitalpharmacy.in** |

(Bringing Innovation in Education & Health

**HEALTH EDUCATION BUREAU**



SUBSCRIPTION FORM