

Subscription Form

Subscription charge is payable in advance and rate include INR 3540 including postage and 18% GSTIN tax. Issues will be sent on receipt of payment. Subscriptions are entered on an annual basis and are subject to renewal in subsequent years.

Subscription Information

Journal Name:
Subscription from: to.....
Date of Order:
Name / Institution:
Full Address:
.....
.....
City: State: Pin Code:
Country: Phone No.: Mob No.:
EmailID:

PAYMENT OPTION:

() DD / Cheque in the favor of "BIOMED RESEARCH PUBLISHERS" payable at DELHI.

DD No.: Dated:

for Rupees (in words) Drawn on.....

() Any other option Specify:

Send this form with payment to (By speed post/courier only):

Subscription Manager, The Journal of Phytopharmacology
H. No. 169, Pocket C-11, Sector-3, Rohini, New Delhi-110085, India. Ph.: +91-8005201234
E-mail: phytopharmajournal@gmail.com, web.: www.phytopharmajournal.com