

First Name Last Name





APPLICATION FORM

Please fill this form and send it to events@hotelshowcolombo.com

Please type or fill in block capitals for legibility (Please complete all sections)

Email					
Mobile Number					
Title	MR	MRS	MS		
Company Name					
Company Address					
Designation					
Competition Categories	Tea Preparation			Tea Live Cooking	
	Tea Pairing				
Representative from the organ	nization,	please fill be	elow		
Name of Contact person					
Designation					
Email					
Contact Number					
Token fee for the Competition is Rs. 1	L,500/- Per	Participant. A		·	er organization.
All applications should be sent togeth	ner with pa	yment. Token	fee is non refur	dable.	
E-mail entries should be accompanied	d by a copy	of your payme	ent proof.		
(The organizers reserve the right to refuse	any entry wi	thout giving a rea	ison.)		
Payments Details					
ENCLOSED HEREWITH PAYMENT (OF RS	Made F	Payable to		
CDC Events and Travels (Pvt) Ltd -	Hotel Sho	w A/C PANAS	IA BANK 1001	.11003225 - W.T.C Branch	١
Address :					
CDC Events & Travels (Pvt) Ltd.					
2nd Floor,"LE CUBE",130, High Lev	el Road, (Colombo 06, S	iri Lanka.		
Tel: +94 11 2515786, 2515787	Mobile	- 0778 394	648		
E-mail: events@hotelshowcolomb	o.com				
Submission of a completed entry to 2024.	orm shall	constitute of	an agreemen	t to abide by the Rules &	Regulations of Ceylon Tea Masters Cup
	re needed	. Please do no	t send cash b	y mail. Competitors will b	e advised of application outcome.
Please send us the application bef	or April 30	0th 2024.			