JSBN Publisher Registration Form

Please fill details in English unless specified to fill in Gujarati.

* Publisher Id: _____ (Please enter exactly 5 English Alphabets in Capitals.)

* Publisher Name: _____

(Please fill publisher name in Gujarati, unless it is in English.)

* State: _____

* City: _____

* Address: _____

_____

_____

* Pincode: _____

* Email: _____

Landline Number: _____

Contact Person: _____ (Please fill in Gujarati.)

* Mobile Number: _____

* Password: _____

Fields marked * are mandatory.

Notes:

1. Please note that the details provided will be available to anyone who wants books published by you.