

REGISTRATION FORM

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(In Capital)

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Contact No. : _____

Email : _____

Delegate/Student/Research Scholar

Whether Presenting Paper / delivering talk

(Yes/No)

Title of the Paper _____

Date

Signature

(1) This form can be photocopied if needed.

(2) The registration form of Research Scholars / Students should be countersigned by the Supervisor/HOD/Principal.

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