

**IV JUSTICE MURTAZA HUSAIN MEMORIAL**  
**MOOT COURT COMPETITION, 2017**

**REGISTRATION FORM**

**PARTICIPATING INSTITUTION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FACULTY-IN-CHARGE: \_\_\_\_\_ POSITION: \_\_\_\_\_

MOBILE NO.: \_\_\_\_\_ EMAIL ID: \_\_\_\_\_

**TEAM MEMBERS**

SPEAKER 1: \_\_\_\_\_

YEAR & PROGRAMME: \_\_\_\_\_

MOBILE NO.: \_\_\_\_\_

EMAIL ID: \_\_\_\_\_



SPEAKER 2: \_\_\_\_\_

YEAR & PROGRAMME: \_\_\_\_\_

MOBILE NO.: \_\_\_\_\_

EMAIL ID: \_\_\_\_\_



RESEARCHER: \_\_\_\_\_

YEAR & PROGRAMME: \_\_\_\_\_

MOBILE NO.: \_\_\_\_\_

EMAIL ID: \_\_\_\_\_



## **DECLARATION**

*WE THE UNDERSIGNED DECLARE THAT THE INSTITUTION ABIDE BY NOTIFIED TO US FROM TIME TO TIME THROUGH OUT THE PERIOD OF THE COMPETITION. WE ALSO DECLARE AND CONFIRM THAT ALL THE INFORMATION PROVIDED IN THE REGISTRATION FORM IS TRUE AND ACCURATE.*

*SPEAKER 1:*

*SPEAKER 2 :*

*RESEARCHER:*

*FACULTY-IN-CHARGE:  
(SIGNATURE WITH INSTITUTION SEAL)*

*DEAN OF COLLEGE:  
(SIGNATURE WITH INSTITUTION SEAL)*