



3rd NATIONAL SYMPOSIUM & AWARDS

SYMPOSIUM REGISTRATION FORM

(Fill in Capital Letter)

Name of the Participant(s)/Author(s) Ms/Mr/Dr/Prof: _____

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Professional Position/ Student: _____

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Payment Details

Amount (in words): _____

remitted an amount of INR _____ dated _____ through

(Bank Name/ PayTM No./ PhonePe _____

and transaction ID _____ towards the

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of the registration form along with the snapshot of the transfer details

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Signature:

Date: