

# Registration Form

**Name:**.....

**Academic year:**.....

**Designation (if applicable):**.....

**Name of the organization:**.....

**E-mail:**.....

**Contact No:**.....

**Address:**.....

.....

**Module opting for:** .....

**Mode of payment: Cheque / Cash (Circle one)**

**Cheque details:**

**Drawee bank:**.....

**Cheque No:**.....

**Date:**.....

Affix  
Photograph