

### REGISTRATION FORM

Name of the institution	
Address	
Contact no.	
Email.Id	
Contact person	
Designation	
Contact No.	
Email.Id	

### REGISTRATION FEE DETAILS

DD.NO	
Drawn on bank	
Date	

**PARTICIPANT DETAILS / BONAFIDE STUDENT CERTIFICATE**

<b>PARTICIPANT 1</b>		
<b>NAME</b>		PASTE RECENT SELF ATTESTED  PASSPORT SIZE  PHOTOGRAPH
<b>YEAR &amp; COURSE</b>		
<b>GENDER</b>		
<b>CONTACT</b>		
<b>EMAIL</b>		
<b>PARTICIPANT 2</b>		
<b>NAME</b>		PASTE RECENT SELF ATTESTED  PASSPORT SIZE  PHOTOGRAPH
<b>YEAR &amp; COURSE</b>		
<b>GENDER</b>		
<b>CONTACT</b>		
<b>EMAIL</b>		

<b>PARTICIPANT 3</b>		
<b>NAME</b>		PASTE RECENT SELF ATTESTED  PASSPORT SIZE  PHOTOGRAPH
<b>YEAR &amp; COURSE</b>		
<b>GENDER</b>		
<b>CONTACT</b>		
<b>EMAIL</b>		

**This is to certify that the above mentioned are bona fide students of**

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(Name & Address of the Institution)

**I/we certify that the above information is true to the best of my/our knowledge.**

**Name of the Head of the Institution:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**SEAL OF THE HEAD OF THE INSTITUTION**