

REGISTRATION FORM

Name of Participant Mr. /Ms. /Dr.: _____

Designation: _____ Department: _____ Organization/Institute: _____

Address: _____

City: _____ State: _____ PIN: _____

Phone No. with STD Code: _____ Mobile: _____ E-mail: _____

Academic Qualifications: _____ Professional Qualifications: _____

Work Experience: _____ Gender: Male / Female: _____

Please tick, whichever are applicable, Submitting paper/ Presenting Paper

Please write Title of the paper _____

Registration Fee Details (Please mark (√) according Registration Fee Details (Please mark (√) accordingly):

| DELEGATE CATEGORY | REGISTRATION FEES | DRAFT | CASH |
|--------------------|-------------------|-------|------|
| Students Delegate | Rs. 300 | | |
| Research Scholar | Rs. 500 | | |
| Academicians Rs. | Rs. 1000 | | |
| Corporate Delegate | Rs. 1500 | | |

Payment Details:

Amount Rs. _____ Draft No.: _____ Issuing Bank: _____ Date: _____

All Drafts should be in favour of "**Tecnia Institute of Advanced Studies**" Payable at New Delhi.

Place: _____

Date: _____

(Signature of the Participant)

Please Note:

1. Please fill the form neatly in capital letters.
2. Last date for receiving the applications is 8th February, 2018.
3. The fee includes conference material and refreshments. A certificate would be issued to the Participants.
4. Fee does not include accommodation, local/outstation travel. No refund will be allowed for Cancellations made. Outstation candidates needing assistance in accommodation (on payment) may Contact the Conference Convener at the address given below.

Kindly send your registration form and DD/ Cheque by post to:

| | | |
|------------------------|-----------------------|--|
| Dr Ajay Kumar | Mob:9811229001 | Conference Director, TIAS Delhi |
| Dr Jitender Rai | Mob:9990365276 | Conference Convener, TIAS Delhi |

Tecnia Institute of Advanced Studies

3, PSP Institutional Area, Madhuban Chowk, Rohini, Delhi – 110085, India

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