SAARC MOOT COURT COMPETITION ,2016

REGISTRATION FORM

NAME OF THE COLLEGE:_____

_____

*E MAIL ID OF THE MOOT COURT COMMITTEE:*_____

_____

SPEAKER 1: _____

NAME :_____

YEAR, COURSE:_____ GENDER:_____

EMAIL ID:_____

CONTACT NO:_____

SELF -ATTESTED PHOTOGRAPH

SPEAKER 2: _____

NAME :_____

YEAR, COURSE:_____ GENDER:_____

EMAIL ID:_____

CONTACT NO:_____

SELF -ATTESTED PHOTOGRAPH

RESEARCHER: _____

NAME :_____

YEAR, COURSE:_____ GENDER:_____

EMAIL ID:_____

CONTACT NO:_____

SELF-ATTESTED PHOTOGRAPH

THE SPEAKERS AND THE RESEARCHER ARE THE BONAFIDE STUDENTS OF THE COLLEGE.
(BY SENDING THIS REGISTRATION FORM, THE PARTICIPANTS AGREE TO COMPLY WITH THE RULES OF THE COMPETITION)

Signature & Seal of the Head of the Institution

SAARC MOOT COURT COMPETITION ,2016

TRAVEL PLAN

NAME OF THE COLLEGE: _____

SPEAKER 1:

1. Date of Arrival: _____

2. Mode (Train/Airways/Bus): _____

3. (Train/Airways/Bus) Number: _____

4. Time of arrival of Train/Airways/Bus:_____

5. Other Details (eg. Name of Airline, Bus Service etc.): _____

SPEAKER 2:

1. Date of Arrival: _____

2. Mode (Train/Airways/Bus): _____

3. (Train/Airways/Bus) Number: _____

4. Time of arrival of Train/Airways/Bus: _____

5. Other Details (eg. Name of Airline, Bus Service etc.): _____

RESEARCHER:

1. Date of Arrival: _____

2. Mode (Train/Airways/Bus): _____

3. (Train/Airways/Bus) Number: _____

4. Time of arrival of Train/Airways/Bus: _____

5. Other Details (eg. Name of Airline, Bus Service etc.): _____

TO BE EMAILED TO THE ORGANIZING COMMITTEE AT:
iilsmootsociety@gmail.com **ON OR BEFORE: 15th January, 2016.**

Signature & Seal of the Head of the Institution