



SARDAR PATEL SUBHARTI INSTITUTE OF LAW  
SUBHARTI & UNMUKT BHARAT  
1st NATIONAL DEBATE COMPETITION-2016  
TEAM REGISTRATION FORM  
(Fill In the Capitals)

NAME OF UNIVERSITY/ INSTITUTE:

.....

PARTICIPANTS DETAILS

MEMBER 1

Name: .....

Course and Year of study: .....

In favour of motion/against the motion: .....

E- mail: .....

Contact No.: .....

Self attested
---------------

MEMBER 2

Name: .....

Course and Year of study: .....

In favour of motion/against the motion: .....

E- mail: .....

Contact No.: .....

Self attested
---------------

DETAILS OF DEMAND DRAFT

Bank Name: .....

Date : .....

Demand Draft No.: .....

Signature and seal of the Head of the Institution