

SCHOOL OF LAW, THE NORTHCAP UNIVERSITY
NATIONAL MOOT COURT COMPETITION
V EDITION 2018

REGISTRATION FORM

PARTICIPATING INSTITUTION NAME:

ADDRESS: _____

FACULTY –IN-CHARGE:

DESIGNATION:

TELEPHONE: _____

EMAIL ID: _____

TEAM MEMBERS

SPEAKER 1:

NAME _____

SEMESTER: _____

TELEPHONE: _____

EMAIL ID: _____



SPEAKER 2:

NAME _____

SEMESTER: _____

TELEPHONE: _____

EMAIL ID: _____



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RESEARCHER:

NAME: _____

SEMESTER: _____

TELEPHONE: _____

EMAIL ID: _____



DECLARATION :

WE THE UNDERSIGNED DECLARE THAT THE INSTITUTION AND ITS TEAM MEMBERS WILL ABIDE BY ALL THE RULES OF THE COMPETITION SET OUT IN THE RULES AND AS NOTIFIED TO US FROM TIME TO TIME THROUGHOUT THE PERIOD OF THE COMPETITION. WE ALSO DECLARE AND CONFIRM THAT ALL THE INFORMATION PROVIDED IN THE REGISTRATION FORM IS TRUE AND ACCURATE.

SPEAKER 1: _____

SPEAKER 2: _____

RESEARCHER: _____

FACULTY INCHARGE: _____

HEAD/DEAN OF SCHOOL: _____

(SIGNATURE WITH INSTITUTION SEAL)