



**ANNEXURE-A**

**REGISTRATION FORM**

(To be filled in block letters)

**A. University Information: -**

Name of Institution/College/University: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ City: \_\_\_\_\_

Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

**B. Participants Information: -**

B1. Speaker-1

Full Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Current degree: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Photograph

B2. Speaker-2

Full Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Current degree: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Photograph



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### B3. Researcher

Full Name: \_\_\_\_\_

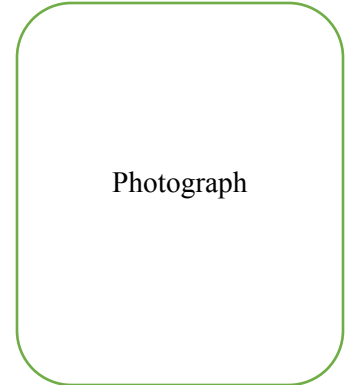
Gender: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Current degree: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



We, the undersigned, confirm that the above mentioned three students are *bonafide* students of our institute and we have obtained permission from their parents to participate in the Moot Court Competition hosted by Department of Law, PIMR, Indore (M.P.).

Faculty-In-Charge: \_\_\_\_\_

Sign and Seal of Head of Institution: \_\_\_\_\_

Place: \_\_\_\_\_

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

SEAL OF THE INSTITUTE: \_\_\_\_\_



**ANNEXURE-B**

**TRAVEL AND ACCOMMODATION FORM**

**A. Arrival Details\*: -**

Date of Arrival: \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

Train/Flight/Bus No.: \_\_\_\_\_

Time of Arrival\*\*\*: \_\_\_\_\_

Place of Arrival: \_\_\_\_\_

Would you require transportation? (From Place of Arrival to Campus): Yes/ No

**B. Departure Details\*: -**

Date of Departure from PIMR-Indore: \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

Train/Flight/Bus No. and Time\*\*\*: \_\_\_\_\_

**\*Local Teams will not be provided transportation.**

**\*\*Kindly clearly specify the time of arrival/ departure of your mode of commutation with 'AM' and 'PM'.**

**C. Accommodation details\*: -**

Accommodation and hospitality facility required: Yes/No

If YES, then:

1. No. Male members: \_\_\_\_\_

Names: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. No. Female members: \_\_\_\_\_

Names: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**\*Registration fees is same for the participants whether taking accommodation or not.**



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**D. Details of additional Members/ Escort/ Faculty\*:**

If any: Yes/No

If YES, then:

1. Name of Male Member: \_\_\_\_\_

Contact No.: \_\_\_\_\_

2. Name of Female Members: \_\_\_\_\_

Contact No.: \_\_\_\_\_

Accommodation Required: Yes/No

**\*Accommodation for faculty member/escort is chargeable with Rs. 4200.**

**Date:**

**Signature & Seal of Institution:**

\_\_\_\_\_

\_\_\_\_\_