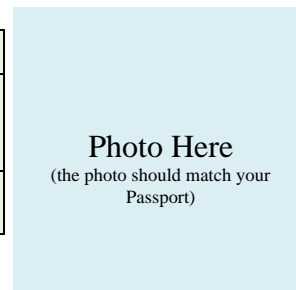


Conference Name	
Venue/Place of Conference	
Date of Conference	



REGISTRATION FORM

Full Name		Highest Qualification	
Affiliation/Designation			
Mailing Address			
City, Zip, Country			Passport Number:
Mobile Number/ Whatsapp Number <small>(With Country code)</small>			Email
ACCEPTED PAPER INFORMATION	Paper ID: (Given in the Acceptance Letter) Title of the paper:		
Co-Author's Name & Designation	1.	2.	3.
			Guided by: Mail ID: Contact No: Affiliation:

PAYMENT INFORMATION

Total Amount (USD/INR)	Bank Name	Remitter	Date	Ref. No
For online transfer <small>(Debit card/Credit card/Online Banking)</small>		Order ID/Traction ID:		

Note: It is mandatory to provide a scan copy of ID Proof /Passport along with this Registration form

ADDITIONAL INFORMATION

- Will you present physically at the event _____(Y/N).
- No. of Persons attending the event with you?(Including your Co-authors)_____.

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