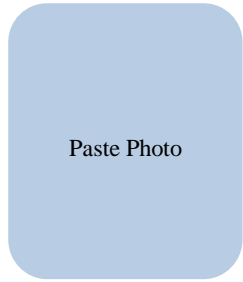




*KINDLY FILL SEPARATE REGISTRATION FORM FOR EACH PARTICIPANT

PRIMARY DETAILS

Table with 2 columns: Field Name (Event/Conference, Venue/Place of Event, Date of Event) and Input Area.



PERSONAL DETAILS

Table with 4 columns: Designation (Dr., Professor, Asst. Prof, Students), Listener Name (with AGE, SEX), Affiliation, Mailing Address (with CITY, COUNTRY), Zip/Postal Code, Passport Number, Mobile Number, Alternative Contact Number, Email.

LISTENER DETAILS

Table with 2 columns: ACCEPTED LISTENER INFORMATION, LISTENER ID, Listener's Name.

PAYMENT DETAILS

Table with 6 columns: Amount PAID(USD), PAYMENT MODE, Bank Name, Remitter, Date, Ref. No. Includes a row for Order ID/Transaction ID and Date of Transaction.

Each Registration includes Conference activities, (Complementary facilities will also be provided such as Conference KIT, Tea & Snacks, lunch (Dinner if applicable). Conference proceedings with ISBN along with Presentation/Attending Certificate will be provided to each registered candidate.

Note:

- 1. It is mandatory to provide a scan copy of ID Proof along with this Registration form
2. Management will not entertain transportation, accommodation or any kind of conference tour.

ADDITIONAL INFORMATION

Attending (Y/N)

Declaration & Undertaking

- 1. Management reserves rights to take action against any misconduct/ unlawful activity of participants at event premises.
2. URLAcademics has all rights reserved to relocate the venue/rescheduling the Event.
3. I declare that all the information provided by me is true and if any incorrect information may lead to cancellation of registration and blacklist from future conferences or legal action can be imposed.
4. I am transferring the Copyright of my paper to URLAcademics.

Signature: Current Date(DD/MM/YY)

Remarks:

Please complete this form and send it along with payment proof, ID proof to: info@urlacademics.com