

ANNEXURE II – REGISTRATION FORMALITIES

REGISTRATION FORM

1. **Name of the Institution/College/University:**

2. **Postal Address:**

3. **Official E-Mail Address:**

4. **Official Telephone No.:**

5. **Faculty In-Charge, Name and Designation:**



MOOT COURT COMMITTEE

Seal & Signature of the Head of the Institution.

Date:

Place:

TEAM COMPOSITION - DETAILS

SPEAKER 1:

Name	
Course Name and Year of Study	
Sex	
Email Id	
Contact No.	

SPEAKER 2:

Name	
Course Name and Year of Study	
Sex	
Email Id	
Contact No.	

RESEARCHER:

Name	
Course Name and Year of Study	
Sex	
Email Id	
Contact No.	

TEAM MEMBER FOR POINT OF CONTACT (POC):-



DATE:

PLACE:

SIGNATURES

SPEAKER 1	SPEAKER 2	RESEARCHER

REGISTRATION FEE - TRANSACTION DETAILS

Name of the Person Making the Payment	
Contact No.	
Bank A/C Number from which the Payment is Made	
Date and Time of Transaction	
Transaction ID	



MOOT COURT COMMITTEE