**REGISTRATION FORM : IPRTD-2019**

1. Name (block letters):
2. Designation:
3. Organization:
4. Address for communication:

Contact No. (Phone/Mobile):

E-mail:

1. Highest Academic Qualification:
2. Accommodation (Tick): Yes / No
3. Arrival Date: Departure Date:
4. Registration Fee detail:

Transaction Id/DD No.: Date:

Amount:

Bank Name:

Place:

Date: Signature of the applicant

Recommendation by the Institute/Department