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***THE INTERNATIONAL CONFERENCE ON ANTI HUMAN TRAFFICKING- THEORY TO PRACTICE***

***REGISTRATION FORM***

**(PLEASE FILL IN BLOCK LETTERS)**

1. **Name of the delegate:**

|  |  |  |
| --- | --- | --- |
| **First Name** | **Middle Name** | **Last Name** |
|  |  |  |

1. **Age: 3. Sex: 4. Designation:**
2. **Institution:**

|  |
| --- |
|  |

1. **Address for correspondence:**

|  |
| --- |
|  |

1. **Phone: 8. Mobile no:**

**9.E-mail:**

**10. Accommodation & Other details:**

**a) Whether you require assistance for finding accommodation: Yes No**

**c) Food preferences: Vegetarian Non-vegetarian**

**11. Payment details:**

1. **Registration fee details**

**Paper presenter Delegate (Professional) Delegate (Student)**

**12. Payment options: (Payment reference number & bank details is must)**

**a) RTGS/NEFT:**

**b) A/C Payee Cheque:**

**c) Demand Draft details:**

**Date: Signature:**