

REGISTRATION FORM



Four Days National Workshop
On
UNIVERSAL HUMAN VALUES AND PROFESSIONAL ETHICS
(Understanding the Value System)
May 22-25, 2020

VENUE: Multipurpose Conference Hall, Fifth Floor, AB-IX

Name (in capital letters): Dr./Mr./Ms. _____

Gender : Male Female

Tick the applicable

(a) Academician (b) Research Scholar (c) UG/PG Student

Designation: _____

Educational Qualification: _____

University / College: _____

Address: _____

Mobile No. : _____

E-mail: _____

Registration Fee Details :

Amount: _____

Mode of payment : Cash Online

Ref No. of Net Banking / NEFT _____

Dated _____ Amount Rs _____

Banker's Name _____

Online fee can be deposited in:

A/c No.: 199901000018885 / IFSC Code: IOBA0001999

Indian Overseas Bank, Ajhai, GLA University, Mathura

Date: _____

Sign of the Participant _____

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Payment Receipt

Payment Received from _____ of Rs. _____

Organizing Secretary