



29th September 2018

REGISTRATION FORM

1. NAME (IN BLOCK LETTERS).....
2. NAME OF COLLEGE.....
3. EMAIL.....MOB:.....
4. COURSE: B.Tech. MBA MCA B.Pharm
5. BATCH..... BRANCH (in case of B.TECH.)
6. EVENT YOU WANT TO PARTICIPATE IN:
 - A. INDIVIDUAL EVENT
 - POSTER PRESENTATION EXTEMPORE
 - I-LOGIC DECODE THE HIDDEN
 - B. TEAM EVENT
 - ROAD FOLLOWER ROBOT
(NAME OF TEAM MEMBERS).....
 - SPOT THE TROUBLE
(NAME OF TEAM MEMBERS).....
 - INNOWAR
(NAME OF TEAM MEMBERS).....
 - COFFEE KLATCH
(NAME OF TEAM MEMBERS).....
7. TOTAL NO. OF EVENTS PARTICIPATING.....TOTAL AMOUNT PAID.....

(SIGNATURE OF PARTICIPANT)

Organized by
Department of Electronics & Communication Engineering
SHRI RAM MURTI SMARAK COLLEGE OF ENGINEERING & TECHNOLOGY, BAREILLY