Conference Details



Registration Form

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Ever	t Name:	Date of Ev	ent:		
Loca	tion:	Time:		Decement photo	
Pai	ticipant Details:			Passport photo	
INDU) RESEARCH SCOL	AR UG/PG STUDENT		
Full I	Name:		-		
Affili	ation with Organization:				
High	est Qualification:				
Addı	ess:				
City:		Country:	Zip:		
		Email id:			
Pass	port Number:				
	Coauthors Name		Designation		
1					
2					
3					
Ada	litional Details:				
	Do you want to join this event Presenter Attendee				
٩	Whether you want to join this event Onsite O Virtually				
	How many no. of Persons atter	ding the event with	you? (Including your Co-authors)		
Pay	ment Details:				
	Payment of a registration fee o uet, and all lunches during the confe Notice that this registration fee doe	erence. In addition, eac		e conference proceedings with	

Total Amount:					
Payment mode					
Bank Transfer 🔵	Online Transfer 🔵	On-site(Cash) 🔵			

Note:

1. It is mandatory to provide a scanned copy of your ID Proof/Passport along with this Registration form Declaration & Undertaking.

2. In case of not attending Physically at the Conference site, Participant needs to pay as virtual attendee fee (Non Negotiable).

- I will not cause or be involved in any sort of violence or disturbance within and Outside of the Conference/Event Venue or during the travel to the venue in any Country during my Visa Period.
- ARL has all rights reserved to shift the venue and reschedule the date of the Conference.
- I do hereby declare that all the information given by me is true and if at any moment it is found to be wrong my registration for the conference will be cancelled by ARL and take necessary action against me.
- ARL is not responsible for any violation of Rules and Regulations by me or by my Co-authors of this paper in any country during the Conference.

Participant's Signature:

Date: _____