Registration Form

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Organizer: INSTITUTION OF ELECTRONICS & TELECOMMUNICATION ENGINEERS & INDIAN SOCIETY FOR VLSI EDUCATION

1. Name of Participant: ________________________________________________________________

2. Categories (UG/PG/PhD/Academia/Industry/ Academia Special): ________________________

3. Contact No.: __________________________ E-mail ID: ________________________________

4. Organization: ___________________________________________________________________

5. Address for Communication: _______________________________________________________
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6. Paper ID: ______________________________________________________________________

7. Paper Title: ______________________________________________________________________

8. Name of Authors: __________________________________________________________________

9. Accommodation Required: From_________ To_________ No. of Person_______________

10. Payment:
    
    | RTGS / NEFT | Name of Account | Date | Amounts | Drawee |
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Signature of Corresponding Author /Participant with date: _______________________________

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