

JUSTICE T RAMACHANDRAN MEMORIAL MOOT

COURT COMPETITION 2016

GOVERNMENT LAW COLLEGE THRISSUR

REGISTRATION FORM

Name of the Institution:

Address:

.....

Contact no:

E-mail:

PARTICIPANT DETAILS

SPEAKER 1

Name:

Gender:

Year & Semester:

Contact No. :

E-mail:

SPEAKER 2

Name:

Gender:

Year & Semester:

Contact No. :

E-mail :

Stick a recent
photograph of
the participant
here.

Stick a recent
photograph of
the participant
here.

RESEARCHER

Name:

Gender:

Year & Semester:

Contact No. :

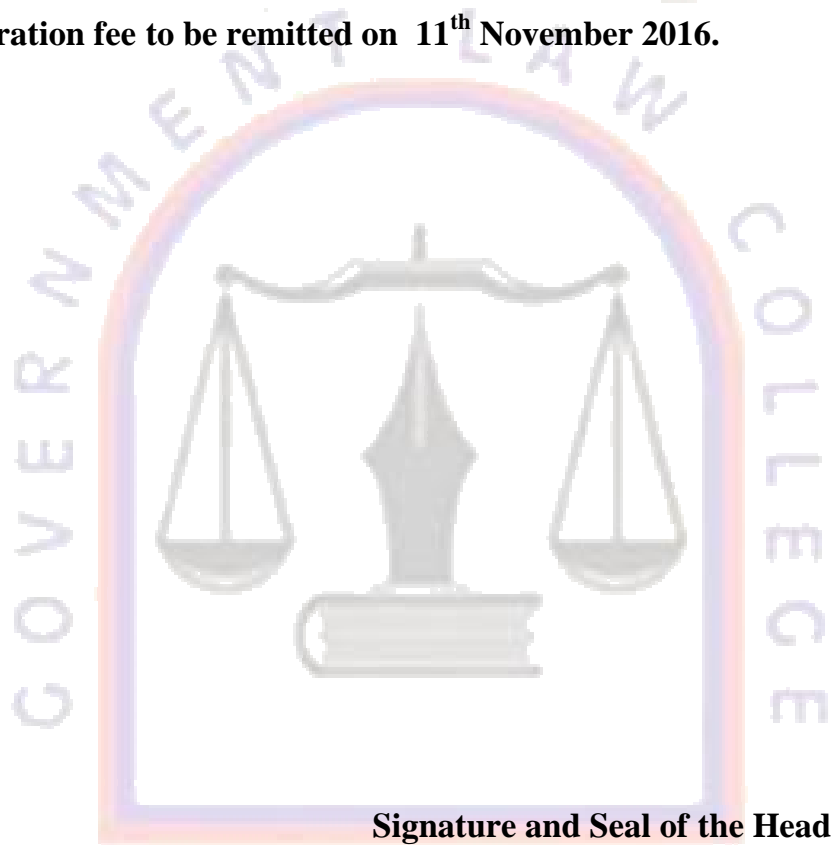
E-mail:

Stick a recent photograph of the participant here.

ACCOMMODATION

Accommodation If Required: Yes/No.....

N.B: Registration fee to be remitted on 11th November 2016.



Signature and Seal of the Head of Institution

Date:

Place:

TRAVEL FORM

Date and Time of Arrival:

Mode of Transportation: Flight Train Bus

Gender Break up (No's): Male Female

.....Date and Time of Departure:



Signature and Seal of the Head of Institution

Date:

Place: