

## PerMin'15 - REGISTRATION FORM

[Each accepted paper MUST be registered by at least one author]

A. Personal Details [ For author registration ]															
Name of registering Author															
Complete Affiliation (designation, department, Institution / Organization, State, PIN Code, Country)															
Date of Birth	D	D	/	M	M	/	Y	Y	Y	Y					
Gender	<input type="checkbox"/> Male					<input type="checkbox"/> Female									
Nationality	<input type="checkbox"/> Indian					<input type="checkbox"/> Other (Specify)									
Phone						Fax									
Mobile						E-mail									
Corresponding Address	Street Name 1														
	Street Name 2														
	City										State				
	Country														
	ZIP code														
B. Article and Presenter's Details															
Article ID															
Title of the article															
Number of authors:				Number of pages in Camera ready article:											
Name(s) of author(s) (in order as manuscript)															
No. of Pages in Camera Ready:				No. of Figure(s)						No. of Table(s)					
Prepared Camera-ready Paper according to guidelines?	<input type="checkbox"/> Yes					Consent to Publish Form signed?					<input type="checkbox"/> Yes				
For Student registration, are you attaching the xerox/scan of proof of studentship?	<input type="checkbox"/> Yes					<input type="checkbox"/> Not applicable									
Have authors received permission if they have used third party material in article?	<input type="checkbox"/> Yes					<input type="checkbox"/> Not used									
Name of presenter :															
Phone number of presenter:						Food habit					<input type="checkbox"/> Vegetarian <input type="checkbox"/> Non-Vegetarian				
Will anyone else travel with you?	<input type="checkbox"/> Yes					If yes, specify number of people:									

C. Registration Fee Detail [ author registration ]																							
Registration category		<b>Author</b>																					
		<input type="checkbox"/> Student				<input type="checkbox"/> General				<input type="checkbox"/> Industry													
Regular Charge		INR						USD															
Total		INR						USD															
<b>Mode of payment (tick below and fill left column or right column accordingly)</b>																							
<input type="checkbox"/> Bank Transfer using SWIFT Code							<input type="checkbox"/> Demand Draft																
Transfer Date		D	D	/	M	M	/	Y	Y	Y	Y	DD Date		D	D	/	M	M	/	Y	Y	Y	Y
Transaction ID								DD number															
Amount (in numerals)								Amount (in numerals)															
Amount in words								Amount in words															
Name of the Bank (from where the fee has been Transferred)								Name of the Bank (from where the DD has been made)															
Branch name (from where the fee has been Transferred)								Branch name (from where the DD been made)															
Account number (from where the fee has been Transferred)								<input type="checkbox"/> I remember to scan the DD and am sending the scan through email along with this registration form.															
<input type="checkbox"/> I remember to send the scanned SWIFT COPY as the proof of the payment and am sending the scan through email along with this registration form mentioning the <i>PURPOSE</i> of this transaction is <b>"REGISTRATION FOR PERMIN'15"</b> .								<input type="checkbox"/> I remember to post the original DD to Mrs. Soma Mitra, Programme Co-Chair, PerMin'15. It will reach before the deadline.															
<input type="checkbox"/> Account Transfer							<input type="checkbox"/> NEFT Transfer																
Transfer Date		D	D	/	M	M	/	Y	Y	Y	Y	Transfer Date		D	D	/	M	M	/	Y	Y	Y	Y
Transaction ID								Transaction ID															
Amount (in numerals)								Amount (in numerals)															
Amount in words								Amount in words															
Name of the Bank (from where the fee has been Transferred)								Name of the Bank (from where the fee has been Transferred)															

Branch name (from where the fee has been Transferred)	Branch name (from where the fee has been Transferred)
Account number (from where the fee has been Transferred)	Account number (from where the fee has been Transferred)
<input type="checkbox"/> I remember to scan the proof of the payment and am sending the scan through email along with this registration form.	<input type="checkbox"/> I remember to scan the proof of the payment and am sending the scan through email along with this registration form.

### Declaration

I hereby declare that all the statements made in this Registration Form are true to the best of my knowledge and belief. I understand and agree that, any form of canvassing, if found before or after the conference, may lead to cancellation of registration without any prior notice.

Place:

Date:

\_\_\_\_\_  
Signature of the Registering Author