**DELEGATE REGISTRATION FORM**

**Paste Your Recent Colour Photograph**

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|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | | |
| **Date of Birth** |  | | **Gender** | | |  |
| **Current Designation** |  | | | | | |
| **Address** |  | | | | | |
| **E-Mail** |  | | | | | |
| **Mobile** |  | **Telephone (STD)** | | |  | |
| **Educational Qualifications** |  | | | | | |
| **Working Experience** |  | | | | | |
| **Area of Interest** |  | | | | | |
| **Category**  **(Please choose the category)** | **Lecturer/Reader/Professor/Principal**  **Teacher**  **Edupreneur**  **Pharmacist**  **Leaders**  **Managers**  **HR**  **Nurse**  **Physiotherapist**  **NGO**  **Scientist**  **Lawyer**  **Charted Accountant**  **Cost Accountant**  **Company Secretary**  **Politician**  **Actor/Actress** | | | **Engineer**  **Doctor**  **Social Worker**  **Entrepreneur**  **Businessman**  **Marketing**  **Finance**  **Agriculturalist**  **Operation Professionals**  **Media Personality**  **Corporate Leaders**  **Industrialist**  **IT Professional**  **Research Scholar**  **Government Employee**  **Others** | | |

**Date: Signature**