## TECHNICAL RESEARCH ORGANISATION INDIA <br> Registration form

## PERSONAL I NFORMATI ON

| Author's Name: | Paper ID |  |  |
| :--- | :--- | :--- | :--- |
| Position: Professor/ Associate Professor/ Assistant Professor/ Lecturer/ PhD Candidate/ Postgraduate/Student |  |  |  |
| Organization or University: |  |  |  |
| Detailed Post Address (Important!): | State: | Mobile(Mandatory): |  |
| City: |  |  |  |
| Sex: |  |  |  |
| Paper ID Code: |  |  |  |
| Paper Title: |  |  |  |
| Co-Authors' Names(Mention all Coauthors name): |  |  |  |
| Coauthors affiliation: |  |  |  |
| Guided by:(Mention name, email ID, mobile no, affiliation )Mandatory: |  |  |  |


| REGISTRATION FEES |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Category |  | Indian |  | Internat | nal |  |
| Under Graduate Students |  | ₹ 2,000 |  | \$ 150 |  |  |
| Post Graduate Students |  | ₹ 2,700 |  | \$ 200 |  |  |
| Industry Professional/ Academicians |  | ₹ 3,500 |  | \$ 275 |  |  |
| Co-Author / Listener (if Attending) |  | ₹ 2,000 | $\square$ | \$ 100 | $\square$ |  |
| ADDITIONAL FEES |  |  |  |  |  |  |
| Additional Conference Proceeding Hard Copy: |  | (Number) X ₹ | 500 | \$ 30 |  |  |
| Additional Conference Certificate Hard Copy: |  | (Number) X ₹ | 200 | \$ 20 |  |  |
| Additional Paper (Per Page) [ limit is 7 pages ] |  | (Number) X ₹ | 100 | \$ 10 |  |  |

## Payment Instructions:

Payable to : TECHNICAL RESEARCH ORGANISATION INDIA
Account Number : 1270102000005647
Bank : IDBI BANK
Branch Name : ESPLANADE, KOLKATA
Branch Code : 001270

IFSC Code : IBKL0001270

Note: After Registration, Please Send the Transaction Details (such as Photo Copy or Scan Copy of Transaction Slip / Bank Statement / Online Payment Details) along with Enrolment No. by Email or by Speed Post Only.
Bank Name : Transaction Number:

DATE:
PLACE:
SIGNATURE:

Enquiries:
CONFERENCE SECRETARY, TROI
E-mail: iccit.gujarat@outlook.com CONTACT NO:07504292808

