

# TECHNICAL RESEARCH ORGANISATION INDIA

## Registration form

### PERSONAL INFORMATION

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

REGISTRATION FEES			
Category	Indian	International	
Under Graduate Students	₹ 2,000 <input type="checkbox"/>	\$ 150 <input type="checkbox"/>	
Post Graduate Students	₹ 2,700 <input type="checkbox"/>	\$ 200 <input type="checkbox"/>	
Industry Professional/ Academicians	₹ 3,500 <input type="checkbox"/>	\$ 275 <input type="checkbox"/>	
Co-Author / Listener (if Attending)	₹ 2,000 <input type="checkbox"/>	\$ 100 <input type="checkbox"/>	
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		

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Date of Transfer/Deposit:	Amount:

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