

Registration Form

Name of the Institution: _____

Turncoat

1. _____

Publicizer

1. _____

Shutter Buzz

1. _____

Brand-Promotio

1. _____

Buiz Quiz

1. _____

2. _____

Start-ups

1. _____

2. _____

Rock Band

1. _____

2. _____

3. _____

4. _____

5. _____

Teacher In-Charge

1. _____

Contact No. _____

Principal's Signature

Registration Form

Please send this form duly filled and attested by the Principal by post or email latest by
September 25, 2017

Details of the Participating Institution

Name of the Institution: _____

Name of the Principal: _____

Address: _____

Phone No: _____ Email: _____

S.No.	Name of Participant (In Block Letters)	Class