

REGISTRATION FORM IT-FEST 2020

Name of Applicant:

Date of Birth:

Educational Qualification:

Gender: (Please Tick): Male Female

Father Name:

Father Occupation:

Corresponding Address:

Permanent Address:

School/College/Institution Name & Address:

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Candidate Mobile No.:

Parent's Mobile No.:

E-mail Address:

Area of Interest:

Participation (Please Tick: Rs. 50 per event):

TECH TEENS TYCOONS TECH MASTER

BIG SHOT INNOVATION IDEATION

Date:

Place:

Signature of Applicant