

Registration form for Conference for Authors

Conf. /Event Name:

Conf./Event Date:
(DD/MM/YY)

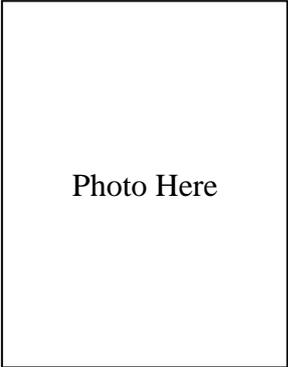
ARC Paper ID.
(would be filled by ARC Officials)

Paper Title:

Author's Name

Gender: Male Female

Postal Address



Mobile

Email

Date of Birth:

Day	Month	Year					

4. Nationality

AFFILIATION
College/University/Company

ACADEMIC INFORMATION (*)

Graduation Post Graduation Ph.D. /Post Doc

No of Conference/Events Attended _____ No of paper published _____

Books / Chapters published & E-learning materials Developed _____ Patents _____

Sponsored Projects (Number & Amount) _____

Awards and Recognition _____

EXPERIENCE (*) (IN YEARS)

Teaching experience	UG :	PG :
Research experience (Post-Ph.D.)		
Industrial experience		

Guided by (*)

Name _____ Affiliation _____

Designation _____ Email ID _____ Contact No. _____

CO AUTHOR'S DETAILS (*)

Co-author-1

Name _____ Affiliation _____

Designation _____ Email ID _____ Contact No. _____

Co-author-2

Name _____ Affiliation _____

Designation _____ Email ID _____ Contact No. _____

Co-author-3

Name _____ Affiliation _____

Designation _____ Email ID _____ Contact No. _____

PAYMENT DEATAILS (*)

Amount Paid _____ (USD/INR) Mode of transfer _____ (Online Transfer/Cash deposit at Bank/NEFT)

Bank Details _____

Transactions ID _____ Date of Transfer (DD/MM/YY) _____

Note:(Mode of transfer: Online Banking/Cash deposit at bank /NEFT) only

ADDITIONAL INFORMATION (*)

❖ How do you get the information about this conference?

Email conferencealert.com From College News Paper Referred by Friends Referred by Professor

Other Websites _____ (Specify)

❖ Have you attended any conference organized by ARC or its allied group before?

Yes (Paper ID _____) No

DECLARATION/UNDERTAKING (*) (Read Carefully before Sign)

Declaration & Undertaking

1. I and my co-authors have not published this paper anywhere before and I am transferring the Copyright of my paper to ARC to print in the Conference Proceeding and Journals decided by ARC Management.

2. I will not cause or be involved in any sort of violence or disturbance, within or outside of the Conference.

3. ARC has all rights reserved to rescheduling the date and timing of the Event at any time.

4. In case of cancellation or re-scheduled of this event to other place or date at any time , ARC will be not responsible for any kind of loss.

5. I do hereby declare that all the information given by me is true and if at any moment it is found to be wrong, my registration for the event will be cancelled by ARC and necessary action will be taken against me.

6. ARC is not responsible for any violation of Rules and Regulations by me or by my Co-authors of this paper at any country during or after the Event.

7. The refund will be done if decided by ARC management will be done as the same mode as I paid and will take 7 to 60 days from the day of refund process starts.

8. I clearly understood the procedure for publication, and registration. I have read all the rules and regulations of ARC

SIGNATURE

Date: _____

Author

Co-author-1

Co-author-2

Co-author-3

Co-author-4

NOTE: Kindly send a scan copy of this form with the payment details to the Conference email id Only for registration Confirmation

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