# REGISTRATION FORM (Authors and Listeners)

[Each accepted paper MUST be registered by at least one author]

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| **A. Personal Details [ For listener / author registration]** | | | | | | | | | | | | | |
| Name of Registering  Author |  | | | | | | | | | | | | |
| Complete Affiliation (Designation, Department,  Institution /  Organization, State, PIN Code,Country) |  | | | | | | | | | | | | |
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| Date of Birth | D | D | / | M | M | / | Y | Y | Y | Y | Gender |  Male |  Female |
| Nationality | Indian | | | | | | |  Other (Specify) | | | | | |
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| Mobile |  | | | | | | | E-mail | | |  | | |
| Corresponding Address | Street Name 1 | | | | | | | | | | | | |
| Street Name 2 | | | | | | | | | | | | |
| City | | | | | | | | | | State | | |
| Country | | | | | | | | | | | | |
| ZIP code | | | | | | | | | | | | |
| REFERENCE ID (if  applicable) |  | | | | | | | | | | | | |
| **B. Article and Presenter’s Details [ For author registration (Listeners please leave section B blank)]** | | | | | | | | | | | | | |
| Article ID |  | | | | | | | | | | | | |
| Title of the Article |  | | | | | | | | | | | | |
| Name(s) of Author(s)  (in order as |  | | | | | | | | | | | | |

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| manuscript) | | | |  | | | | | | | | | | | | | | | | | | |
| Number of pages in Camera ready article: | | | |  | | | | |  | | | No. of Figure(s) | | |  |  | | | No. of Table(s  ) |  | |  |
| Prepared Camera-ready Paper according  to FICR-TEAS 2020 guidelines? | | | | | | | | |  Yes | | | | | *Consent to Publish* Form signed? | | | | | | |  Yes | |
| For Student registration, are you attaching the scanned proof of studentship? | | | | | | | | | | | | | | | | | |  Yes | | |  Not Applicable | |
| **C. Registration Fee Details** | | | | | | | | | | | | | | | | | | | | | | |
| Registration category | | | | **Author** | | | | | | | | | | | | | | **Listener** | | | | |
| Student Academician Industry | | | | | | | | | | | | | | | | | | |
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| Transfer  Date | D | D | / | M | M | / | Y | Y | | Y | Y | | Transaction ID / Payment Reference No. | | | |  | | | | | |
| Amount (in numerals) | | | | Amount (in numerals) | | | | | | | | | | | | | | | | | | |
| Amount in words | | | | Amount (in words) | | | | | | | | | | | | | | | | | | |
| Name of the Bank (from where the fee  has been Transferred) | | | |  | | | | | | | | | | | | | | | | | | |
| Branch name (from  where the DD been | | | |  | | | | | | | | | | | | | | | | | | |

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| made) |  |
| Name of Account holder from whose account the transfer  has been made |  |
| Account number (from where the fee has been Transferred) |  |

# Declaration

I hereby declare that all the statements made in this Registration Form are true to the best of my knowledge and belief. I understand and agree that, any form of canvassing, if found before or after the conference, may lead to cancellation of registration without any prior notice.

Place:

Date: Signature of the Registering Author/Listener