

SSR COLLEGE OF PHARMACY
Sayli, Silvassa, U.T. of Dadra & Nagar Haveli-396230

Registration form

THREE DAYS
(5th, 6th & 7th September 2018)

ENTREPRENEURSHIP AWARENESS CAMP

Supported By

**National Science & Technology Entrepreneurship Development Board (NSTEDB),
Department of Science and Technology, Govt. of India, New Delhi**

Name: _____

Date of Birth: _____ **Age:** _____

Programme: _____ **Class:** _____

Name and Address of Present Organization: _____

Address of Communication: _____

Contact No.: (M) _____ (O) _____

Email ID: _____

Registration Payment by Demand Draft / Cash

Cheque / D.D. Number: _____ **of Date:** _____

Name of Issuing Bank: _____

Date:

Sign. of Applicant:

Last date of Registration is 1st September 2018, Saturday. Photocopy of this form can be used.

Receipt

Sr. NO: _____

Received with thanks from Mr./Ms./Mrs. _____ an

amount of Rs 300/- against registration fees for "ENTREPRENEURSHIP AWARENESS
CAMP" by Cheque/Demand Draft/Cash

Sign of Receiver