

The 8th RLC Saquib Rizvi Memorial National Moot Court Competition 2016-17

REGISTRATION FORM

INSTITUTION DETAILS:

Name of College / University:

Address:

City:

State:

PIN Code:

CONTACT INFORMATION:

Name of College / University Contact Person:

Email:

Phone:

TEAM DETAILS:

Name of Speaker 1:

Email:

Phone:

Name of Speaker 2:

Email:

Phone:

Name of Speaker 3:

Email:

Phone:

Signature of the Head of Institution

Seal of the Institution