

CONFERENCE REGISTRATION FORM

(This form is to be used for Paper, First/Additional Author or Attendee/Listener Registration; all fields are mandatory)

A. Conference Details					
Title of the Conference					
Date of the Conference		Conference Acronym			

	B. Personal De	etails	
Name of the Registering Author:			
IDES Membership No: (if any)	The second		
Date of Birth (dd/mm/yyyy)		Gender	
Total Years of Experience (Teaching & Research)	3	Education	1
Nationality			0
Currently Residing Country	and the second second		1
Category of Registration	First Reg.	Additional Reg.	Attendee
Contact Number			1. 1. 1.
Mobile	Carl	- Ch.	1 2 1
E-mail	- Jack		10.1
Complete Affiliation (designation and department, School, country)		S	1520
Address for Communication (print media to be dispatched – if applicable)	17		S
How did you heard about ComNet 2014	Emails	Newsletters Ir	nternet Friends
Note: Authors residing at Host Country can ma	ke payment in Local Currei	ncy; All other Authors shall pa	y equivalent amount in US\$

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C. Paper I	Details (only for Author/Co-Author)	
Paper ID		1.55
Title of the Paper		Contraction of the second
Category of the Paper	- /	
Track of the Registration		Carlo II
Name the co-authors(if any)		/ #
Copyright Transferred	YES	NO
Camera-ready Paper Submitted	YES	NO
Total Number of pages*	(in digit)	(in Words)
Mention other Paper IDs registering to this		
conference (if any)		
Name the co-authors or Attendees/ Spouse		
registration (if any)		
* Camera Ready paper must confirm to specific Format of the re	spective track.	



D. Registration Fee				
Details	Authors from Host Country	International Authors		
Registration Fees	INR	US\$		
No. of additional Pages				
Additional Page Charge		US\$.		
Service Fees (10% of the total amount transferred)		US\$.		
NOTE: Add 10% towards the service charges and tax	L			

E. Optional Charges				
Conference Accessories	Authors from Host Country	International Authors		
Print Media of the Proceedings	L D PL	US\$		
Additional Conf Kit with CD	EIIUIN	US\$		
Additional Food Coupon	10 C C C C C C C C C C C C C C C C C C C	US\$		
Conference Bag		US\$		
Conference T-Shirt		US\$		

	F. Payment Details	
Total money Transferred		1 2 1
Mode of payment #	1.	2121
Transaction ID	Participant in the second seco	E 0 1
Bank Option ##		
Sender Name (who actually made the transfer)		N Desterior
Bank Name and Brach Details (from where the	1	0.0
amount is Transferred)		1.1.22.5
Date (dd/mm/yyyy) of payment		1.65
Remarks (if any)		and the second sec
# Mode of payment : Wire Transfer / Direct Deposit ## Bank Options: UBI Bank <u>http://www.theides.org/payme</u>	ent-in-ubi.htm	101
Send your completed registration form along with the so Sponsoring Organizations.	canned copy of the proof of payments	and Membership Photo ID card of the

Place:		3120	~	And in case of the local division of the loc	-	100	25	14	
Date:	100 March 100	181				1		of the Registering A	Author

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