



REGISTRATION FORM

PROGRAM NAME: _____ **PROGRAM DATE:** _____

COMPANY NAME _____

ADDRESS _____

1. PARTICIPANT NAME _____

DESIGNATION _____

PHONE (O) _____ (MOBILE) _____

EMAIL _____

2. PARTICIPANT NAME _____

DESIGNATION _____

PHONE (O) _____ (MOBILE) _____

EMAIL _____

3. PARTICIPANT NAME _____

DESIGNATION _____

PHONE (O) _____ (MOBILE) _____

EMAIL _____

PAYMENT IN FAVOUR OF **THE CENTRE FOR EXCELLENCE**

THROUGH RTGS/CASH / CHEQUE NO./ D.D NO. _____ FOR RS. _____

DATED _____ DRAWN ON _____

RTGS Details

Bank account name : The Centre For Excellence

Bank name : Bank of Baroda

Branch name : Horniman Circle Branch, 10/12, M. S. Marg, Fort, Mumbai – 400 023

Account type : Current Account

Bank account number : 27940 20000 1531

RTGS/NEFT IFSC Code : BARB0PBBMUM (5th Character is Zero)

MICR Code : 400012111

Registration fees are not refunded. However substitutions are allowed. Please send us an email for substitutions, if any.

SIGNATURE

TODAY'S DATE