REGISTRATION FORM

Hamline-IIAM Moot Competition

Name of Applicant College: _____
(IN CAPITAL LETTERS)
Complete address for correspondence: _____

_____

Pin Code: _____ Phone: _____

Fax: _____ Mobile: _____

Email: _____

Details of Participants: Name: _____
(IN CAPITAL LETTERS)
Year of study: _____

Gender: _____

Name: _____
(IN CAPITAL LETTERS)
Year of study: _____

Gender: _____

Details of Observer/: Researcher Name: _____
(IN CAPITAL LETTERS)
Year of study: _____

Gender: _____

Date:

Signature of Institution Head:

- Duly filled up Registration Forms can be sent by mail to Indian Institute of Arbitration & Mediation, 209, Main Avenue, Panampilly Nagar, Cochin 682 036. Tel: 0484 6570101, with Registration fee of Rs. 500/- by DD in favour of Indian Institute of Arbitration & Mediation.

(FOR OFFICE USE ONLY)

Name of Institution: Fee:

No. of participants (Gender-wise): Days:

Memoranda: Code:

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