

AUTHOR REGISTRATION FORM

Call: +91 9952674994 E-mail: abstracts@wrfconference.com Website: www.wrfconference.com

Payment of a registration fee covers the cost to attend all conference activities, coffee breaks, conference reception and banquet, and all lunches during the conference. In addition, each registrant will receive a copy of the conference certificate.

Notice that this registration fee does not cover transportation fee, accommodation fee, and after conference tour fee.

All questions and inquiries concerning registration and payment should be addressed to:
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Please complete this form and email a scanned copy to: abstracts@wrfconference.com

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Event Name										
Venue/Place of Event										
Date of Event										
PLEASE KINDLY FILL	IN A S	EPARATE REG	ISTRATION FO	RM FOR	EACH	I CONFEREN	ICE PA	RTICIPA	INT	
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Mailing Address										
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ADDITIONAL INFORM	AATI()N								
 Will you present physically at the event (Y/N). 										
No. of Persons attending the event with you? (Including your Co-authors)										
Will your Guide/HOD/Principal attending will attend the Event?(Y/N).										
Declaration & Undert	aking	<u>:</u>								
 I agree to the cancellation I understand that WRF is venue, or schedule. 	s not res	ponsible for my to	ravel or accommo	dation arr	angeme	nts and any los.	ses due t	o changes	in the event format,	
 I acknowledge that my re I accept that WRF reserv I confirm that I have reac payment. 	es the r	ight to conduct th	e conference in ph	iysical or v	rirtual f	ormat, and no r	efund wi	ll be provi	ided for such changes.	
Signature (Author):					Da	ite:				
Remarks:					_					