

1. Correspondence Email:
2. Contact &WhatsApp No.:
3. Gender (M / F):
4. Name in Capital (Prof. / Dr. /Mr. /Ms.):
5. Designation:
6. Subject:
7. Department:
8. Organization:
9. Correspondence Address:
10. Participation Type: A-Oral Presentation B- Poster Presentation C- None
11. Submitted Manuscript:
12. Abstract
13. Poster
14. Lead Paper for Proceeding Book
15. Research Paper for Journal
16. Book Chapter for Edited Book
17. If you interested for Presentation, please send following details:

A- Date & Session

B- Presentation Title

1. Accommodation: (on Payment Basis)
2. Yes / No
3. Basic Hotel / Deluxe Hotel / Super Deluxe Hotel / Hostel/ Dormitory
4. No. of Accompanying Person
5. Conference Registration Fee:
6. Rs. in Words:
7. Payment Mode (NEFT/RTGS/Net Banking/PayTm/GPay/PhonePe/PayPal/Other):
8. Payment Date: Transaction Reference Number:
9. Sign &Date:

**DetailsforConference Fee**

|  |  |
| --- | --- |
| **Banking Account Details** | **Online Payment Details** |
| **AccountName** | Samagra Vikash Evam Paryavaran Sanrakshan Samiti | **PayTm**/**Google Pay/****PhonePe**  | **9587263545** |
| **Bank Name** | Indian Overseas Bank |
| **Bank Address** | Mahewa Poorav Patti, Prayagraj,U.P.,India |
| **Account No.****IFSC Code:-** | 255602000000190IOBA0002556 |
| **IFSCCode** | IOBA0002556 |
|  |  | **PayPal** |  |