

SPRINGER LNNS SERIES-2nd INTERNATIONAL CONFERENCE
ON COMMUNICATION, COMPUTING & NETWORKING (ICCCN-
2018)
(29-30 MARCH, 2018)
NATIONAL INSTITUTE OF TECHNICAL TEACHERS TRAINING & RESEARCH
SECTOR-26, CHANDIGARH

Registration Form

Name: _____

Designation: _____

Organization: _____

Date of Birth: _____ Gender: _____

Address for Correspondence: _____

Email ID: _____ Mobile Phone: _____

Whether Student (Yes/ No): _____ (Please Attach photocopy of your valid student ID card)

To Register in the Conference (As an Author/ As a Delegate): _____

Paper ID: _____

Paper Title: _____

Number of Pages: _____

Mode of Payment: DD/NEFT/RTGS: _____

Amount: _____ Date of Issue/Transaction: _____

DD No./ Transaction ID/UTR Number: _____

Date: _____

Signature: _____

Note: I hereby undertake that submitted work is original work and has not been sent for publication elsewhere and also must have taken the consent of co-authors.

***For student registration, the author should be full time/regular student.**