

## (Fill details in CAPITAL only)

Name:		
(First name)	(Last Name)	
Designation:		
Organisation / Institute Name:		
GSTIN Number (If required Tax Invoi	ice)	
Organisation / Institute Address:		
Email: (Official)		
Residential Address:		
Contact Numbers: (O)	(M)	
Food preference: Vegetarian	Non-vegetarian Jain	

Paym	ent Options:			
	e select the method led below to it:	l by ticking the box provid	led and mention its det	ails in the space
<u>Optio</u>	<u>n 1</u> : Demand I	Oraft or Cheque Payment		
DD /	Cheque No:	Dated	for Rs	
drawn	on (bank nam	ne)		in favour of
Lifeli	ne Foundation pa	yable at Vadodara toward	s registration fees.	
<u>Optio</u>	<u>n 2</u> : NEFT Pa	iyment		
Our b	ank details for pay	ment by NEFT are as und	ler:	
Αςςοι	ant Name: Lifeline	Foundation		
Name	of Bank: Axis Ba	nk Ltd.,		
Branc	h Name: VADOD	ARA (GJ)		
Αςςοι	unt Number: 0130	10100908382		
IFS C	ode: UTIB000001	3		
Please	e Note:			
i.	Registration Fee	s per person: Rs. 1,000.00	) + 18% GST	
ii.		regarding registration plea 30026009 or mail to mova		•

- iii. Please inform us the date of remitting the NEFT payment by email. Send details along with registration form to <a href="movaconregistration@emsindia.in">movaconregistration@emsindia.in</a> so that we can confirm the receipt of your payment and thereby confirm your registration.
- iv. Registration form and DD/Cheque needs to be sent to following address

MoVACon Conference Secretariat, Lifeline Foundation, E-501, Kalpavruksh Complex, Gotri Road, Vadodara – 390 021 Gujarat