

## Registration Form

**Institute Name:**

**Event Registering for:**

S. No	Name of Participant	Contact No.	Email ID	Signature

Email the duly filled Registration form to: - [iperfest@iper.ac.in](mailto:iperfest@iper.ac.in)

Chaitanya Shiksha Samiti  
A/C IPER



SCAN & PAY

**Registration Fee .....**

### Registration Fee Details

Individual	Group of 2	Group of 3-5	Group of more than 5
INR 200	INR 300	INR 500	INR 750/-
Institutional Registration Package			
INR 5000	For Maximum of 50 Students from One Institute.		
Email ID	<a href="mailto:iperfest@iper.ac.in">iperfest@iper.ac.in</a>		

(Seal & Signature of  
Director/HOD) Contact Number:  
Email id:

*Participation fees to be paid in Cash/ Online using the QR Code mention above*