Registration Form

Participant ID …….. (For official Use)

Presenter Information

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Abstract Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Number (for International Participant): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tour Plan: (i) Arrival (ii) Departure

Choice of presentation in Conference: Oral Poster

Bank Transfer: Only Registration fees should be paid for by Bank Transfer to the State bank of India, details below.

|  |  |
| --- | --- |
| Name of the Bank: | State Bank of India |
| Account Number: | 30054181310 |
| Account Name: | Director NIT Raipur |
| IFSC Code: | SBIN0002852 |
| Bank Address: | National Institute of Technology Raipur Campus,  G. E. Road Raipur, 492010, Chhattisgarh, India |
| Swift Code: | SBININBB646 |

**Please note the following:**

Please do not forget to include the following reference in the bank transfer “CE-FMC2019 REGISTRATION FEE”, as well as the registration ID & name of the participant.

All bank charges incurred will be borne by the payee.

Participants intending to pay by bank transfer should first alert the secretariat by email to [[CEmoleculetocrystal2019](mailto:CEmoleculetocrystal2019@gmail.com)**@gmail.com**](mailto:icbest2018@gmail.com)The Secretariat will require a copy of the bank transfer document to identify the payee.

No confirmation will be sent until the registration secretariat has received the full payment.

**For International Participant:** Attendees making a bank transfer should first calculate the equivalent amount of their registration fee in US Dollars, using their banks exchange rate on the day of the transfer. The payment should be in US dollars

**NOTE:** Participant ID will be communicated to participants once registration form is received by organizing committee.