

REGISTRATION FORM

ICTICP-2017

International Conference on Trends in Informatics and Computing Processing (ICTICP-2017)

1. **COMPLETE** clearly in BLOCK LETTERS - detailed as possible please
 2. **E-MAIL** Registration Form, as well as proof of payment to **icticp2017@gmail.com**
- Ensure that that you receive a confirmation by e-mail from the organizers within 2 working days.

CONFERENCE DETAILS

Conference Name:	International Conference on Intelligent System and Control Communication (ISCC-2017)
Paper Title:	
Paper ID:	

PERSONAL DETAILS

Author Name:					
Company / Institution:					
Postal Address:					
	City:		Country:		Postal Code:
E-mail Address:				Mobile No.:	

CO-AUTHOR DETAILS

1.	Co-author Name:		Mobile No:	
2.	Co-author Name:		Mobile No:	
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4.	Co-author Name:		Mobile No:	

REGISTRATION FEES

Category	Indian	Foreign
Authors (Academician/Practitioner)		
Authors (Student M.tech/PhD)		
Authors (B.Tech)		
Listeners:		
Extra Proceeding		

METHOD OF PAYMENT	Direct bank deposit / transfer <input type="checkbox"/>	Online <input type="checkbox"/>	TOTAL	
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Enquiries:
Conference Coordinator, IRD India
E-mail: icticp2017@gmail.com

E-MAIL Registration Form, as well as
proof of payment to
icticp2017@gmail.com



Direct bank deposit / transfer (Please DO NOT mail Cheques / DD)

Account Name : Institute for Research and Development India
Account Number : 32343999264
Bank : State Bank of India
Branch Name : Khandagiri / Ganjam
Branch Code : 10927
IFSC Code : SBIN0010927 (used for RTGS and NEFT transactions)
Swift Code : SBININBB270
Reference : You're **Name** as it appears on the registration form.

**Please ensure that
you receive a
confirmation by
e-mail from the
organizers within
2 working days.**

Date:		Signature:	
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