



Zonal Workshop Student Registration Slip

Participant Name _____

Contact details (mobile) _____

Email id _____

College name _____

Payment Received Yes No

Signature (coordinator)

Note- Kindly bring this slip to the workshop

*****Cut along this line *****



Zonal workshop Coordinator Copy Slip

Participant Name _____

Contact details (mobile) _____

Email id _____

College name _____

Payment Received Yes No

Signature (coordinator)

Note- Kindly give this slip to Nurture Talent Academy for verification