Annexure 1 1



35th AIU National Youth Festival 3rd -7th February 2020

TEAM REGISTRATION FORM (please submit in duplicate)

1. Name of University/College/Institution.....

2.	Arrival date & time at AUUP, Noida Departure date & time from AUUP, Noida								
	-		ling & lodging will be a 2020 evening.	only av	ailable fro	om 2 nd February			
3.	Team Members (Total team/contingent strength should not be more than 42)								
		Name of Team Manager/Contingent In-Charge -							
		Mr/Ms							
	Mobile N		Email id-						
	S.No.	Name		P/A*	Gender	Mobile No.			
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Annexure 1 2



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^{*}Participant/Accompanist

Name	Signature	(Official Stamp)	Date
(Dean Student Welfare/Director Youtl	h Welfare/Cu	ltural Coordinator)	
,	,	,	
Email	Mobile	No	
		. 110	

Please note -

- One copy of Annexure 1 to be emailed to msahni@amity.edu on or before 20th January 2020.
- Two copies of Annexure 1 to be submitted at Registration Desk at the venue.