

**5<sup>th</sup> ANAND SWAROOP GUPTA MEMORIAL  
NATIONAL MOOT COURT COMPETITION, 2020  
SCHOOL OF LAW, SHARDA UNIVERSITY**

**REGISTRATION FORM**

(Please fill in bold letters only)

Name & Address of the Institution: .....

.....

Faculty In-charge: .....

Contact No. of Faculty In-charge: .....

Email of Faculty In-charge: .....

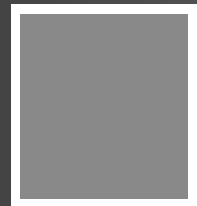
Details of the Participants: .....

**SPEAKER 1**

Name: .....

Year and Course of Study: .....

Mobile: .....

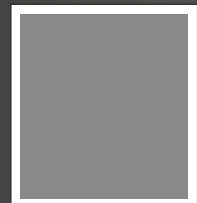


**SPEAKER 1**

Name: .....

Year and Course of Study: .....

Mobile: .....

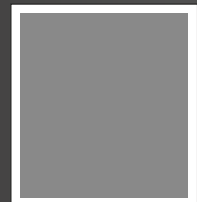


**RESERCHER**

Name: .....

Year and Course of Study: .....

Mobile: .....



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*This is to certify that aforementioned candidates are students of this institution who would participate in the moot court competition conducted by your Institution and that their participation complies with the guidelines of the competition.*

Place: .....

Date: .....

Seal and Signature of the  
Head of the Institution

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NATIONAL MOOT COURT COMPETITION, 2020  
SCHOOL OF LAW, SHARDA UNIVERSITY**

**REGISTRATION FORM RESEARCHER'S TEST**

(Please fill in bold letters only)

Name of the Institution: .....

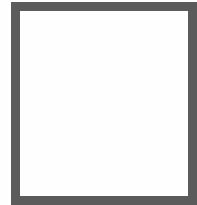
Address of the Institution: .....

**PARTICIPANT**

Name: .....

Year and Course of Study: .....

Mobile: .....



**Bona Fide Certificate**

This is to certify that the aforementioned candidate is a student of this institution who would participate in the Moot Court Competition conducted by your Institution and that their participation complies with the guidelines of the Competition.

Place: .....

Date: .....

Seal and Signature of the  
Head of the Institution