

APSYM 2016 Registration Form

Name of the Author :

Email Address & Telephone No. :

Address for Communication :

Paper ID & Title :

IEEE Membership Number :

Payment Details

1. Demand Draft (to be drawn in favour of Director, APSYM payable at Ernakulam)

DD No.....Date.....

Amount.....Drawn on

scanned copy of the DEMAND DRAFT/PAYMENT RECEIPT here

2. Bank Transfer (SB A/c No. 57014625903, IFSC: SBTR0000235)

Director APSYM, SBT, Cochin University campus branch, Ernakulam

Receipt Number.....Date.....

Amount.....Bank's Name.....

The details I have furnished in this form are true to the best of my knowledge. I agree to abide by conference ethics and rules of conduct set by the program chairs.

Signature

Name & Affiliation

Please send the details and **scanned copy** of the transfer receipt/DD as mail attachment. If payment is by DD, please send the hard copy of the registration form along with DD