 

**ISIE-Electric Solar Vehicle Championship 2022**

**REGISTRATION FORM**

**IMPERIAL SOCIETY OF INNOVATIVE ENGINEERS**

NOTE: The form should be filled in the block letters.

ESVC22 CLASS………………………………………………..

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| NAME OF TEAM |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME OF COLLEGE / UNIVERSITY |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME OF TEAM  CAPTAIN |  | | CONT. NO. |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  | |  | |
| MAIL ID |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME OF TEAM VICE CAPTAIN |  | | CONT. NO. |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  |  | |
| MAIL ID |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME OF TEAM FACULTY ADVISOR |  | | CONT. NO. |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | |  |  | |
| MAIL ID |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADDRESS OF  COLLEGE |  | | STATE |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| PIN CODE |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADDRESS OF TEAM CAPTAIN |  | | STATE |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| PIN CODE |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME OF ADDITIONAL TEAM FACULTY ADVISOR (not mandatory) |  | | CONT. NO. |  |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  |
| MAIL ID |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **SR. NO.** | | **NAME OF PARTICIPANT WITH DEPARTMENT IN TEAM** | | **EMAIL ID OF TEAM MEMBER** | | **CONTACT NUMBER OF TEAM MEMBER** | | **ISIE MEMBERSHIP ID** | |
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**Declaration**

I hereby declare that all the information provided in the registration documents and online registration forms are correct to the best of my knowledge. Also, I declare that the team would undertake all the activities without the help of professional directly or indirectly. In case of violation of rules and regulations specified in the Instructions Manual, the team is liable for further actions as per the decision of the “ISIE” Management. The team is also liable for any losses of documentation/communication on part of discrepancy in the information as provided above.

SIGNATURE OF TEAM

CAPTAIN

SIGNATURE OF TEAM FACULTY ADVISOR

HOD/DEAN/PRINCIPAL NAME: …………………………………………………………….

DESIGNATION: ……………………………………………………………………………….

CONTACT NO: ………………………………………………………………………………..

MAIL ID: ……………………………………………………………………………………….

SIGNATURE OF DEAN / HOD OF COLLEGE

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLACE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_