

National Bioengineering Conference 2023
Bioengineering in Healthcare, Environment & Agriculture

REGISTRATION FORM

Basic Details:

Name : _____

Designation : _____

Organisation: _____

Address : _____

Phone No. : _____ Mobile. : _____

Email Id. : _____

Type of Presentation? Oral/Poster

Title of the Presentation : _____

Accommodation Required*: Yes/No

**Limited accommodation (payment basis) will be provided on first cum basis within campus*

Gender: Male / Female

Details of Accompanying Person (If any): _____

Registration Fee Details:

Amount: _____

DD No./ Online Payment Reference No. : _____

Acc. No.: 36734418111 IFSC: SBIN0002109

Bank Name: State Bank of India, NIT Campus, Rourkela

Signature:

Place:

Date :

The filled up registration form should be mailed to bioengineering23@gmail.com along with a scanned copy of the registration fee payment receipt.