

**AMITY LAW SCHOOL, AMITY UNIVERSITY UTTAR PRADESH (AUUP)  
LUCKNOW CAMPUS**

**National Workshop and Faculty Development Programme  
on  
Client Counselling and Alternative Dispute Resolution (ADR)  
(14<sup>th</sup>-18<sup>th</sup>, March 2018, Lucknow)**

**REGISTRATION FORM**

**Name**.....

**Designation**.....

**Department**.....

**University/ Institution**.....

**Address for Correspondence**.....

.....

.....

**Contact No.**.....

**E-mail ID**.....

**Details of Payment: Cheque No./Demand Draft No/ Cash**..... **Dated**.....

**Bank Name**..... **Branch**..... **Amount (In Figures)**.....

**Amount (In word)**.....

**Declaration**

I hereby declare that all the particulars stated in this registration form are true and correct to the best of my knowledge & belief.

**Date**..... **Signature**.....