Application Form for Booking of Auditorium at IIIT Manipur

1.	Name of Member/Organization:	
2.	Communication Address:	
3.	Contact Telephone No.:	Mobile No.:
	Email Id.:———	
4.	Date on which Auditorium required	d:
5.	Timings:	FROM TO
6.	Purpose for which required:	
7.	Number of Person expected:	
8.	Name of Chief Guest and other digr	nitaries:
9.	Is the event being organized in collaboration or Funding with some outside agency. (Like Society/Association/Charitable Institutions/ or any other professional body)?	
10.). Is a delegate participant's fee being charged from the Participants? (Yes/ No)	
11.	1. Is the function/event is Conference/Workshop/Symposium Funded/approved by IIIT Manipur?	
12.	. Brochure / website address of the event, if available	
13.	Have you read the Guidelines/Term / No)	s & Conditions Formulated by the IIIT Manipur? (Yes

I/We have read and understood the guidelines for booking of the venues and catering, and undertake to fully comply with these guidelines. In case of non-compliance, the booking will be cancelled.

Yours faithfully,

Signature:

Name Capital Letters:

Designation:

Name of the Organization:

Full Address:

Telephone No. /Mobile No:

Email:

Official seal of the office