



| Organizes STATE LEVEL DANCE COMPETITION In Association with Hi-Tech College of Pharmacy Alumni Association. REGISTRATION FORM Name of college / institute | Shri Tuljabhavani Sevabhavi Shikshanik Va Samajik Shikshan Sanstha, Kothari HI-TECH COLLEGE OF PHARMACY | | | | | |
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| In Association with Hi-Tech College of Pharmacy Alumni Association. REGISTRATION FORM Name of college / institute | | | | | | |
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| Name of college / instituteAddress:Address:Contact Person / Team Organizer Faculty :Student :Contact No | Hi-Tech College of Pharmacy Alumni Association. | | | | | |
| Address: Contact Person / Team Organizer Faculty : Student : Contact No | | | | | | |
| Contact Person / Team Organizer Faculty : | | - | | | | |
| Student : Contact No | | _ | | | | |
| Contact No. | Faculty : | _ | | | | |
| Contact No. | Student : | | | | | |
| Total No. of Members in Group : | | | | | | |
| | Total No. of Members in Group : | _ | | | | |

Name of Participants

| SN | Name of Participants | DOB | Class | Contact No. |
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Seal of Institute

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Principal