



NATIONAL SYMPOSIUM
Bikaner Through The Ages
ORGANIZED BY
DEPARTMENT OF HISTORY
MAHARAJA GANGA SINGH UNIVERSITY, BIKANER
February 27, 2017
REGISTRATION FORM

Registration Number :

Date:

Name of Participant: Prof./ Dr. /Mr./Ms.....

Gender : Male () Female ()

Designation:

E-mail:

Phone/Mobile No.

Name of Organization:

.....

Address for Correspondence:.....

.....

Status of Participant: Delegate/Research Scholar/Student/Accompanying person/ Other

.....

Place:

Signature of Participant

Date:

Please mail your registration form to

Convener, National Symposium
MGS University, Bikaner 334004
historysymposiummgsu@gmail.com