

# IPA National Pharma Quiz Competitions 2018

## Registration Form

S. No	Name of the Student	Course and year of study	Gender	Mobile Number	Email ID
1.					
2.					
3.					

Name of the College :

### Payment Details:

Transaction ID :

Date of Transaction :

Type of Transaction :  
(NEFT/ IMPS/ UPI/ Wallet; Please specify)

Amount Transferred :



### **Note:**

1. Only III, IV B. Pharmacy and IV, V Pharm.D students are eligible to apply.
2. Please enter the above details in a word document and e-mail us to [ipaquiz2k18@gmail.com](mailto:ipaquiz2k18@gmail.com).
3. In case of more than one team from a college, registration fee can be paid in a single transaction and a registration form specifying the individual teams can be mailed.
4. Last date for registration : 17/11/2018
5. Once we confirm the registration, an e-mail containing the details, pattern and login IDs for the online preliminary round will be sent to the students' corresponding e-mail ID. Please provide a working mail ID.