**Kinnaird college for women presents**

**Kinnaird’s 2nd International Conference**

**in Social Sciences and Humanities October 24th-26th, 2019.**

CONFERENCE REGISTRATION FORM

|  |  |
| --- | --- |
| **Event/Conference Name** | ***Kinnaird’s 2nd International Conference*** ***In Social Sciences and Humanities*** |
| **Venue/Place of Event** | Kinnaird College for Women Lahore, Pakistan  |
| **Date of Event** | October 24th -26th , 2019 |

**EACH PARTICIPANT IS REQUIRED TO FILL A SEPARATE REGISTRATION FORM**

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| **Tick the relevant category**  | Professional | Student | Faculty Member | International: Presenters / Participants |
| Title 1.Dr. 2. Mr. 3. Ms. 4. Prof. | Name |  |
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**TOTAL AMOUNT PAID AS REGISTRATION FEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Declaration & Undertaking**

*1. I have not published this paper anywhere before.*

*2. I will not cause or involve in any sort of violence or disturbance within and Outside of the Conference venue.*

*3. Kinnaird has all rights reserved to shift the venue, rescheduling the date of the Event.*

*4. I do here by declare that all the information given by me is true.*

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date(DD/MM/YY)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please send a scanned copy of registration at:* *research.conference@kinnaird.edu.pk*