CTAE ALUMNI SOCIETY
COLLEGE OF TECHNOLOGY AND ENGINEERING, UDAIPUR- 313 001
(Website: http://www.ctae.ac.in/index.php?id=7&type=DP ; email: ctaealumniassociation@gmail.com)

__Application Form CTAE 15th Alumni Meet__
(October 14, 2017)

AFFIX PHOTO HERE

1. Name (in Capital Letters) : _____

2. Designation (if any)   : _____

3. Date of Birthday   :   [(DATE)] [(MONTH)] [(YEAR)]

4. Date of Marriage Anniversary (if any) : [(DATE)] [(MONTH)] [(YEAR)]

5. Address (Permanent): _____
_____

6. Address (Present/Office): _____
_____

    Phone (with S.T.D. Code): _____

    Email: _____

    Mobile: _____   Fax: _____

7. Details of Degree Obtained from CTAE: _____ (Degree) _____ (Branch)

    Year: _____ (Admission) _____ (Pass out)

8. Fee details: Registration Fee: 500/- [   ]   AND   Life Membership Fee: 2000/- [   ]

    (Tick There)   (Tick There)

Cash/Cheque/Demand Draft /NEFT No.: _____ Date: _____

Name of Bank & Branch: _____

Electronic transfer/net banking details: ICICI Bank, University Campus Branch, Udaipur; S/B a/c no: 694201094114; Account Name: CTAE Alumni Society; IFSC Code: ICIC0006942; MICR Code: 313229007

If via email: send confirmation slip of the payment.

Date: _____

Place: _____

Name & Signature

NOTE: Please make all payment in favour of **CTAE ALUMNI SOCIETY** payable at Udaipur and send this form to The Hon. Secretary, CTAE ALUMNI SOCIETY, CTAE, Udaipur