

Grand Education Fair 2017
Knowledge Consortium of Gujarat, Ahmedabad
Application Form (To be filled in Duplicate)

Name of Organization: _____

Type of Organization: _____

Address with Pin code: _____

Phone: _____

Fax: _____

Name of Chief Executive: _____

Designation: _____

Contact No. _____

Name of Contact Person: _____

Designation: _____

Contact No: _____

Email Id: _____

Website: _____

Payment Details:

SN	Details (Please tick)	Space Allotted	Amount
1	University <input type="checkbox"/> College <input type="checkbox"/> Other <input type="checkbox"/> Food Court <input type="checkbox"/>		

Amount of Rent: _____

TDS (10% of Amount of rent): _____

Total Payment: _____

Mode of Payment: _____

Cheque/DD No.: _____

Signature and Stamp

Name	Size of Stall	Amount
University:	20*10	Rs.1,00,000
Other Institute:	10*10	Rs.30,000
College:	10*10	Rs.20,000