



**TAMIL NADU NATIONAL LAW UNIVERSITY  
TIRUCHIRAPPALLI – 620027**

**4<sup>th</sup> TNNLU NATIONAL MED-ARB COMPETITION 2022**  
(22<sup>nd</sup> April – 24<sup>th</sup> April)



**NMAC**

**REGISTRATION FORM**

(TO BE FILLED IN BLOCK LETTERS)

**INSTITUTION DETAILS**

Name of the College/University	
Address	
Contact No.	
E-Mail	
Contact Person	
Designation	
Contact No.	
E-Mail	

**REGISTRATION FEES PAYMENT DETAILS**

**ONLINE PAYMENT DETAILS**

Ref No. / UTR No.	
Bank	
Date	

(Participants making payment online, kindly mention in the remarks of payment “Registration Fee for 4<sup>th</sup> TNNLU National Med-Arb Competition, 2022”)



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**PARTICIPANTS' DETAILS**

<b>Participant</b>	<b>Name and Year of Study</b>	<b>Gender</b>	<b>Mobile No. and Email ID</b>	<b>Photograph</b>
Participant 1				
Participant 2				
Participant 3				

**DECLARATION FORM**



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We hereby declare that the institution and its team members will abide by all the Rules of the Competition set by the Organizers and as notified to us from time to time throughout the period of the Competition. We also declare and confirm that all the information provided by the Organizers in the registration form is true and accurate to the best of our knowledge. In case of non-compliance or violation of any rules or regulations on our part, the Organizers shall reserve the right to cancel our registration/candidature.

\_\_\_\_\_  
Participant 1

(Name & Signature)

\_\_\_\_\_  
Participant 2

(Name & Signature)

\_\_\_\_\_  
Participant 3

(Name & Signature)

Date: \_\_\_\_\_

Seal and Signature of the Head of the Institution