

AA COHS ALUMNI SOCIETY
College of Home Science
CSK Himachal Pradesh Krishi Vishvavidyalaya
Palampur 176062

(Website: www.hillagric.ac.in ; email: aacohspalampur@gmail.com)

REGISTRATION / ACCOMODATION REQUEST FORM
AA COHS ALUMNI MEET

PHOTO

1. Name (in capital letters): _____
2. Present Occupation (if Any): _____
3. Designation: _____
4. Address : _____

Phone (with S.T.D. code) _____ Mobile _____
Email _____ Fax _____
5. Participation as Alumni member / Sponsor(Please Tick): _____
6. Details of Degree obtained from COHS (For Alumni only): _____
7. Any specific professional achievement (if any) : _____

8. Registration fee details: (Registration fee for Alumni members: Rs. 3000/- ; per accompanist: Rs. 500/- ; enrolled students : 500/-)
Accommodation required (Yes / no) _____
No. of single bed room (AC/Non –AC) _____ No. of single bed room (AC/Non –AC) _____
Date on which accommodation required _____
No. of family members accompanying you: _____
Total amount paid (Rs.): (Registration fee + Accommodation advance) _____
Demand draft No. _____ Date _____
Name of Bank _____

Electronic transfer / net banking details: SBI, HPAU, CSKHPKV Palampur 176062. SBI a/c No. 34101123302; Account name: AA COHS Alumni society; IFC code SBIN0003632 (please mention date, account number and amount transferred).

Date: _____

Place: _____

Name and Signature

Note: Please make all the payments in favour of AACOHS Alumni Society payable at SBI HPAU and send this form to the joint secretary, AACOHS, CSKHPKV Palampur