



MEMBERSHIP FORM FOR INNOVATION HUB/IDEA LAB

COLLEGE STUDENTS

(Use capital/block letters, Paste one photo in the space provided, attach one stamp size photograph for pasting on membership card)

**Paste Photo of
Passport Size here**

1) Name of the College Student

2) Postal/Residential Address with Pin code

3) Class and Name of institution studying with address

4) Contact Phone No:

5) Email ID :

6) Preferred day **SATURDAY/SUNDAY** (tick any one)

7) Preferred Session (tick any one)

Morning (10-30AM to 1.00Pm)

Afternoon 2.30 PM to 5.00 PM

Date :

Signature of applicant

For Office Use only

Please receive Rs.2,000/- (Rupees Two thousand only) towards the membership fee of Innovation Hub of VITM.

Signature

Received Rs.2,000/-(Rupees Two thousand only) towards the membership fee of Innovation Hub of VITM vide receipt No: _____ dt _____ Signature _____

Membership issued No: _____ & valid from _____ to _____

Signature