GLOBAL MINDS CONSULTANCY

INSTITUTE REGISTRATION FORM

Institute Name

University Name

Institute Type :

- ☐ Engineering
- ☐ MCA
- ☐ MBA
- ☐ Pharmacy
- ☐ B.Ed / M.Ed
- ☐ Degree / Law
- ☐ P.G. College
- ☐ Hotel Management
- ☐ Others

Contact Address

Phone No : Fax :

Address :

City / Town :

District

State :

Country : India Pin Code :

Website :

Email :

Contact Person Details

Name :

Email :

Designation :

Phone No.:

Payment Details

1. Consultancy Fee/Amt. _____ + Service Tax _____ = Total Amount. _____

☛ Cheque/Draft/Pay Order No: _____ Bank : _____Branch _____Date :_____

☛ Net Banking Details : Name : **GLOBAL MINDS CONSULTANCY,** Bank : **INDIAN BANK**
A/C No : **6102777502,** NEFT / RTGS / IFSC Code : **IDIB000K212,** Branch : **KONDAPUR**

1) All Payments should be in favor of "Global Minds Consultancy" Payable at Hyderabad, India.
2) Registration form along with Cheque/DD Should be sent throught Post / Courier to the address mentioned below.

Declaration :

I/we hereby declare that the information provided by me / us in this form is correct and complete to the best of my knowledge. I/we have gone through and agreed to the terms of usage and conditions governing the relationship and the services made available by Global Minds Consultancy. I / we acknowledge and agree to pay "Global Minds Consultancy" the above mentioned net amount payable on behalf of institute for the featured services as chosen above.

Place: Date : Signature & Stamp

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