Alumni Association

Dr YS Parmar University of Horticulture and Forestry

Dr YS Parmar University of Horticulture and Forestry, Nauni, Solan 173 230 HP

Registration Form

1. **Name**

Photograph

1. **Father’s Name**
2. **DOB**
3. **Present Occupation with Nature of Job**
4. **Address for Correspondence**

Phone No (with code) Off: Res:

Cell: FAX:

Email:

1. **Permanent Address**

Phone No (with code):

1. **Degree obtained from Dr YS Parmar University of Horticulture and Forestry/College of Agriculture, Solan/Horticultural Complex, Solan**

|  |  |  |  |
| --- | --- | --- | --- |
| **Degree Obtained** | **Subject** | **Year of Passing** | **Name of College** |
| **BSc** |  |  |  |
| **MSc** |  |  |  |
| **PhD** |  |  |  |
| **MBA** |  |  |  |

1. **Mode of payment \***
	1. **By cash ………………….**

ii. Bank draft No………………………….. …………………..issued by……………………

…………………………dt……………………in favour of bank…………………..………..

iii. Online payment made through/Transaction ID ……………...……………………………………………………dated…...........…………………

Signature

***Send the duly filled in form to:***

**THE SECRETARY, ALUMNI ASSOCIATION, DR YS PARMAR UNIVERSITY OF HORTICULTURE AND FORESTRY, NAUNI, SOLAN 173 230 HIMACHAL PRADESH**

**For Office use only:**

**Alumnus No…………………………………….. Rpt No…………………….**

**Dated………………………………….**

**\*Rs. 500/- as Membership Fee Email:** **alumninauni@gmail.com**

**Account Number: 09690110012024 IFSC: UCBA0000969**