

**PARTICIPATION in SAMBHAV 2018, An International Event  
Of Seminar on Disability & Yoga, Dance & Music Therapy Exposition, Art & Craft Exhibition & Workshop  
and Performances by Artists with Disability for Sharing of Best Practices in Advancing Rights of  
DIVYANGJAN, Persons with Disability (Locomotor and Intellectual Impairment) through Inclusive Arts  
On 16, 17 & 18 November 2018 at Azad Bhavan, ICCR, IP Estate, New Delhi, India**

**REGISTRATION FORM TO BE FILLED BY EACH APPLICANT**

Full Name of Applicant (Capital letters)	First Name:		Sex: Male / Female	
	Last Name:			
Name of Group/ Organisation				
Country of residence				
Category of participation (Kindly √) YOU MUST ATTACH COPY of CERTIFICATE ABOUT NATURE of DISABILITY of THE APPLICANT	<input type="checkbox"/> Category A (kindly identify types of disabilities) <input type="checkbox"/> Category B (kindly mention nature of work and title of paper to be presented at international seminar) <input type="checkbox"/> Category C (kindly mention field) <input type="checkbox"/> Category D (kindly mention type) <input type="checkbox"/> Category E (kindly mention type) <input type="checkbox"/> Other Category (please give details)			
Land Address GIVE FULL DETAILS				
Passport Details: (Send scanned copy of first & last pages of the passport of each applicant)	Passport Number:	Date of issue:		
	Place of issue:	Date of expiry:		
Date of Birth: (DD/MM/YYYY)				
Tel:	Fax:	E-mail:		
Materials required for international seminar, performances or art exhibition or forum:				
Equipments required for the evening performance				
Material to be sent by deadline	You must email the write-up on theme of evening performance, names and photos of artists. Video recording of sample performance or internet Video link of sample performance. Paper presenters must send their names and abstract of paper.			
<b>Arrival in New Delhi (indicative)</b>		<b>Departure from New Delhi (indicative)</b>		
Date:	From (City):	Date:	To (City):	

I declare above particulars are correct and I want take part in SAMBHAV 2018 and would abide by all the conditions of organizers. Please register me.

Signature of applicant:  
(Or of Authorized Person in case the applicant cannot sign)

Note: Please submit scanned copy of this form and other scanned materials, documents, videos/links by **30 June 2018** on e-mail: [alpanasociety@gmail.com](mailto:alpanasociety@gmail.com)