

**The Vidya Sagar Adventure Trophy**February 06– 07, 2010

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Name of the Organization: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone no: \_\_\_\_\_ Fax: \_\_\_\_\_

Number of teams: 

Contact person for team I: \_\_\_\_\_

Contact number: \_\_\_\_\_ Email: \_\_\_\_\_

Contact person for team II: \_\_\_\_\_

Contact number: \_\_\_\_\_ Email: \_\_\_\_\_

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Amount enclosed Rs: \_\_\_\_\_ Payment Mode: \_\_\_\_\_

Cheque/DD No: \_\_\_\_\_ Dated: \_\_\_\_\_

Drawn on: \_\_\_\_\_

(Cheque/DD to be made in favour of "Vidya Sagar", payable at Chennai)

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Please send the complete d form with  
cheque/DD of the requisite amount to:Ms Rohini  
Vidya Sagar  
No 1, Ranjith Road, Kotturpuram,  
Chennai – 600085

Phone: 91-44-22354980/4784/4785

Signed on behalf of the Company by:

Name:

Designation:

Contact No.:

Signature: