

Student's copy:



Regional Science Centre, Bhopal

Form: Registration of Students for Membership in Innovation Hub

1.	Name of the Student	
2.	Residential address & Phone No.	
3.	Name of the School	
4.	Class	
5.	Discipline	
6.	Duration	From _____ to _____ Time Slot :

Details of Payment:

Amount : ₹ 1,000/- Receipt No. _____ Dt. _____ Sign of Cashier: -----

Regd No: INNO.HUB : PHY/CHEM/BIO/ELECT/ROBO/HCOMP/BFS/TPJ

Signature of Guardian/Student

Signature of Issuing Authority

Kindly bring this copy on the first day of the session without fail to get membership in the Innovation hub. Please feel free to contact on: 0755-2661655 for any queries

Office copy:



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1	Name of the Student		Paste the passport size Photo
2	Residential address Phone No		
3	Name of school		
4	Class		
5	Discipline		
6	Duration	From _____ to _____ Time Slot :	

Details of Payment:

Amount: ₹ 1,000/- Receipt No. _____ Dt. _____ Sign of Cashier: _____

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