

ISS Season 2

Team Name	
College Name	
Address	
City/State	
Team Captain	
Mail id	
Contact no-	
Faculty Advisor	
Mail id	
Contact no-	
Team Members	

Member 1	
Name	
Branch	
Year	
Contact	

Member 2	
Name	
Branch	
Year	
Contact	

Member 3	
Name	
Branch	
Year	
Contact	

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Member 4	
Name	
Branch	
Year	
Contact	

Member 5	
Name	
Branch	
Year	
Contact	

Member 6	
Name	
Branch	
Year	
Contact	

Member 7	
Name	
Branch	
Year	
Contact	

Member 8	
Name	
Branch	
Year	
Contact	

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Member 9	
Name	
Branch	
Year	
Contact	

Member 10	
Name	
Branch	
Year	
Contact	

Member 11	
Name	
Branch	
Year	
Contact	

Member 12	
Name	
Branch	
Year	
Contact	

Member 13	
Name	
Branch	
Year	
Contact	

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Member 14	
Name	
Branch	
Year	
Contact	

Member 15	
Name	
Branch	
Year	
Contact	

Member 16	
Name	
Branch	
Year	
Contact	

Member 17	
Name	
Branch	
Year	
Contact	

Member 18	
Name	
Branch	
Year	
Contact	

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Member 19	
Name	
Branch	
Year	
Contact	

Member 20	
Name	
Branch	
Year	
Contact	

Member 21	
Name	
Branch	
Year	
Contact	

Member 22	
Name	
Branch	
Year	
Contact	

Member 23	
Name	
Branch	
Year	
Contact	

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Member 24	
Name	
Branch	
Year	
Contact	

Member 25	
Name	
Branch	
Year	
Contact	

Signature
(Team Captain)

Seal & Signature
(HOD)

Note-Mail us the filled form within 3 working days at
[**hindustanmotorsports@gmail.com**](mailto:hindustanmotorsports@gmail.com)