**REGISTRATION FORM**

**MARKETING PLAN IMOTION 2017**

Team’s Name :

University :

**Members Identity**

***1st Member* (Team Leader)**

Full Name :

Nick Name :

Phone Number(s) :

Email Address :

Birthday (Month/Day/Year) :

Faculty/ Major/ Batch :

***2nd Member***

Full Name :

Nick Name :

Phone Number(s) :

Email Address :

Birthday (Month/Day/Year) :

Faculty/ Major/ Batch :

***3rd Member***

Full Name :

Nick Name :

Phone Number(s) :

Email Address :

Birthday (Month/Day/Year) :

Faculty/ Major/ Batch :

***4th Member***

Full Name :

Nick Name :

Phone Number(s) :

Email Address :

Birthday (Month/Day/Year) :

Faculty/ Major/ Batch :

***5th Member***

Full Name :

Nick Name :

Phone Number(s) :

Email Address :

Birthday (Month/Day/Year) :

Faculty/ Major/ Batch :

**PAYMENT CONFIRMATION FORM**

Transaction Date : (Day) – (DD/MM/YY) – (Hour:Min:Sec)

**Payment Confirmation Slip (Photo/Scan) : (SENT AS ATTACHMENT TO THE EMAIL)**

***FILE NAME*: MarketingPlanRegistrationForm\_[TEAM’S NAME]\_[UNIVERSITY].docx  
*EXAMPLE*: MarketingPlanRegistrationForm\_Imoman\_Universitas Indonesia.docx**