



JAYA COLLEGE OF PARAMEDICAL SCIENCES COLLEGE OF PHARMACY
THIRUNINRAVUR CHENNAI-602 024

JCP ALUMNI ASSOCIATION

REGISTRATION FORM

Name :

Father's Name :

Date of Birth :

Present Address with Designation :

Permanent Address with E-mail ID :

Registration fees : Cash / Cheque / Demand Draft

Infavour of " JCP Alumni Association", Thiruninravur.

Signature of the Candidate

REGISTRATION FEE

Rs.100/-