



THAKUR RAMNARAYAN COLLEGE OF LAW

LEX COMMUNIQUE 2026

FORMS

UNDERTAKING, REGISTRATION & TRAVEL



LEX COMMUNIQUE 2026
FORM I



APPROVAL LETTER / UNDERTAKING

We hereby confirm and certify that

1. Our participation complies with the rules and regulations of the competition.
2. The materials which are being/will be submitted are prepared by us and indemnify the organisers from any claim or dispute arising out of further use and/or exhibition of these materials.
3. Our College is aware of our students' participation in Lex Communique 2026.

(The following details can be filled on the form or submitted with the participating Institution's letterhead)

NAME OF THE INSTITUTION: _____

ADDRESS: _____

REGISTERED EMAIL ID:

REGISTERED MOBILE NO.: _____

Signature of the Institution Head
& Seal of the Institution





**LEX COMMUNIQUE 2026
FORM II**



REGISTRATION FORM FOR TRIAL ADVOCACY

(To be filled in Block Letters)

NAME OF THE INSTITUTION: _____

ADDRESS: _____

FACULTY IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO.: _____

EMAIL ID: _____

STUDENT IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO: _____

EMAIL ID: _____

TEAM DETAILS

PARTICIPANT 1 (SPEAKER 1):

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 2 (SPEAKER 2):

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 3 (RESEARCHER 1):

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 4 (RESEARCHER 2):

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

Total Members in the Team: M_____ F_____

Contact Number: _____

Whether Accommodation Required [Yes/No]: _____

If Yes; No. of Male (M) _____ and Female (F) _____

BANK DETAILS

TRANSACTION ID: _____

NAME OF THE BANK: _____

BRANCH: _____

MODE OF PAYMENT: _____

DATE OF PAYMENT: _____

NAME OF THE HEAD OF THE INSTITUTION: _____

SIGNATURE:

SEAL OF THE INSTITUTION:



LEX COMMUNIQUE 2026
FORM III



REGISTRATION FORM FOR YOUTH SUMMIT

(To be filled in Block Letters)

NAME OF THE INSTITUTION: _____

ADDRESS: _____

FACULTY IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO.: _____

EMAIL ID: _____

STUDENT IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO: _____

EMAIL ID: _____

TEAM DETAILS
PARTICIPANT 1:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 2:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 3:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 4:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 5:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 6:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 7:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

Total Members in the Team: M _____ F _____

Contact Number: _____

Whether Accommodation Required [Yes/No]: _____

If Yes; No. of Male (M) _____ and Female (F) _____

BANK DETAILS

TRANSACTION ID: _____

NAME OF THE BANK: _____

BRANCH: _____

MODE OF PAYMENT: _____

DATE OF PAYMENT: _____

NAME OF THE HEAD OF THE INSTITUTION: _____

SIGNATURE: _____

SEAL OF THE INSTITUTION: _____

LEX Communique
a new beginning...



LEX COMMUNIQUE 2026
FORM IV



REGISTRATION FORM FOR CLIENT COUNSELLING

(To be filled in Block Letters)

NAME OF THE INSTITUTION: _____

ADDRESS: _____

FACULTY IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO.: _____

EMAIL ID: _____

STUDENT IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO: _____

EMAIL ID: _____

TEAM DETAILS
PARTICIPANT 1:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 2:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

Total Members in the Team: M_____ F_____

Contact Number: _____

Whether Accommodation Required [Yes/No]: _____

If Yes; No. of Male (M)_____ and Female (F)_____

BANK DETAILS

TRANSACTION ID: _____

NAME OF THE BANK: _____

BRANCH: _____

MODE OF PAYMENT: _____

DATE OF PAYMENT: _____

NAME OF THE HEAD OF THE INSTITUTION: _____

SIGNATURE:

SEAL OF THE INSTITUTION:





LEX COMMUNIQUE 2026
FORM V



REGISTRATION FORM FOR JURIS-ATHON
(To be filled in Block Letters)

NAME OF THE INSTITUTION: _____

ADDRESS: _____

FACULTY IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO.: _____

EMAIL ID: _____

STUDENT IN-CHARGE FOR COMMUNICATION: _____

CONTACT NO: _____

EMAIL ID: _____

TEAM DETAILS
PARTICIPANT 1:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

PARTICIPANT 2:

FULL NAME: _____

SEMESTER: _____

GENDER: _____

CONTACT NO.: _____

EMAIL ID: _____

Recent Passport-size Photograph

Total Members in the Team: M_____ F_____

Contact Number: _____

Whether Accommodation Required [Yes/No]: _____

If Yes; No. of Male (M)_____ and Female (F)_____

BANK DETAILS

TRANSACTION ID: _____

NAME OF THE BANK: _____

BRANCH: _____

MODE OF PAYMENT: _____

DATE OF PAYMENT: _____

NAME OF THE HEAD OF THE INSTITUTION: _____

SIGNATURE:

SEAL OF THE INSTITUTION:





LEX COMMUNIQUE 2026 FORM VI



TRAVEL DETAILS

ARRIVAL DETAILS

Name of the Institution: _____

Mode of Travel (Air/Train/Bus/Car): _____

Details (Flight No./ Train No.& Name with Coach/ Bus Details)

Date and Time of Arrival: _____

DEPARTURE DETAILS

Mode of Travel (Air/Train/Bus): _____

Details (Flight No./ Train No. & Name with Coach/ Bus Details)

Date and Time of Departure: _____

Pl. Note: The Organizers will not provide any pick-up/drop services from Airport/ Railway Station. The teams shall directly reach the venue.

Signature of the Participants