

Registration Form

Dear Innovation Challenge 2018 committee Young Royal HaskoningDHV Indonesia,
herewith we intend to register our team to participate in the Innovation Challenge 2018.

Team name : _____

Topic : _____

Paper title : _____

University : _____

Advisory lecturer

Name : _____

Major/Faculty : _____

Address : _____

Phone : _____

Email address : _____

Team leader

Name : _____

Major/Faculty : _____

Address : _____

Phone : _____

Email address : _____

Team member 1

Name : _____

Major/Faculty : _____

Address : _____

Phone : _____

Email address : _____

Team member 2

Name : _____

Major/Faculty : _____

Address : _____

Phone : _____

Email address : _____

By signing this form:

1. We confirm that the data in this form is correct
2. We will abide by the rules from Innovation Challenge committee and exempt the committee, PT. Haskoning Indonesia, and Royal HaskoningDHV from any charges.
3. We guarantee that all materials submitted are free from any copyright issues and plagiarism.
4. We allow the materials submitted and any result of this competition to be owned and used by PT. Haskoning Indonesia and Royal HaskoningDHV to their full extent.

_____, _____ 2018

Team leader

Acknowledged by:
Advisory lecturer

(_____)

(_____)