

## EVENT REGISTRATION RECEIPT

**Receipt Number:** EVENT-000001  
**Registration Date:** 2025-03-14 06:39:52

### Customer Details

**Name:** Drishya  
**Email:** drishyajose2027@mca.ajce.in  
**Phone:** 9447185695

### Event Details

**Event Title:** Foam Party  
**Event Type:** Fitness  
**Date:** 2025-03-22  
**Time:** 12:23 PM  
**Location:** Bball court  
**Amount Paid:** ?30.00

*Thank you for registering for our event. We look forward to seeing you there!*

### Terms and Conditions:

1. Please arrive 15 minutes before the event starts.
2. This ticket is non-refundable.
3. For any queries, please contact our customer support.