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Name of School:								
Truffic of Deficion.								
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Delegation Information:

S. No	Name	Committee	Gender	Meal Preference
		Preference	(M/F)	(Veg/Non Veg)
1.				
2.				
3.				
4.				
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6.		111		
7.				
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9.				
10.				
11.				
12.				
13.		111		
14.				
15.				
16.				
17.	ПСІЛІ		1	Q

Name of Escort:		
Gender (M/F):	Meal Preference (Veg/Non Veg):	

*Even though, we shall endeavour to meet your committee preferences, we do not guarantee that all committee preferences will be met. All committees are mentioned in the website, so we request you to use the committee abbreviations to mention the preferences.



DSMUN'18