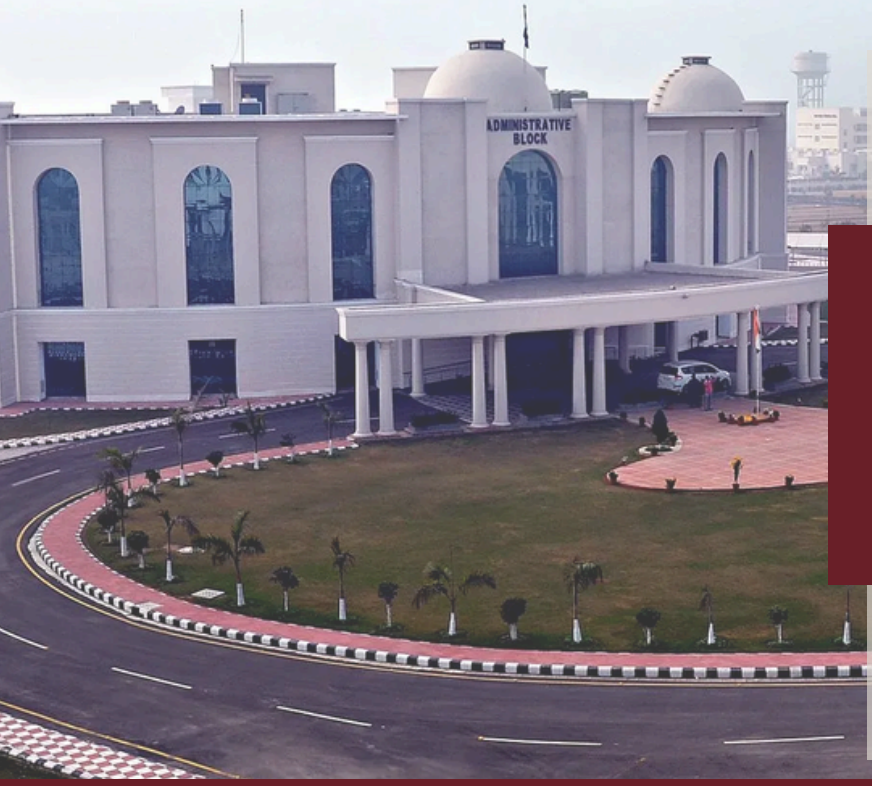
उपभोक्ता मामले विभाग
DEPARTMENT OF
CONSUMER AFFAIRS

RAJIV GANDHI NATIONAL UNIVERSITY OF LAW, PUNJAB
presents



7th February, 2026
(Online)
&
20th - 21st February, 2026
(Offline)

RGNUL NATIONAL MOOT COURT COMPETITION
on Consumer Protection Laws
2026

sponsored by

THE MINISTRY OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION, GOVERNMENT OF INDIA

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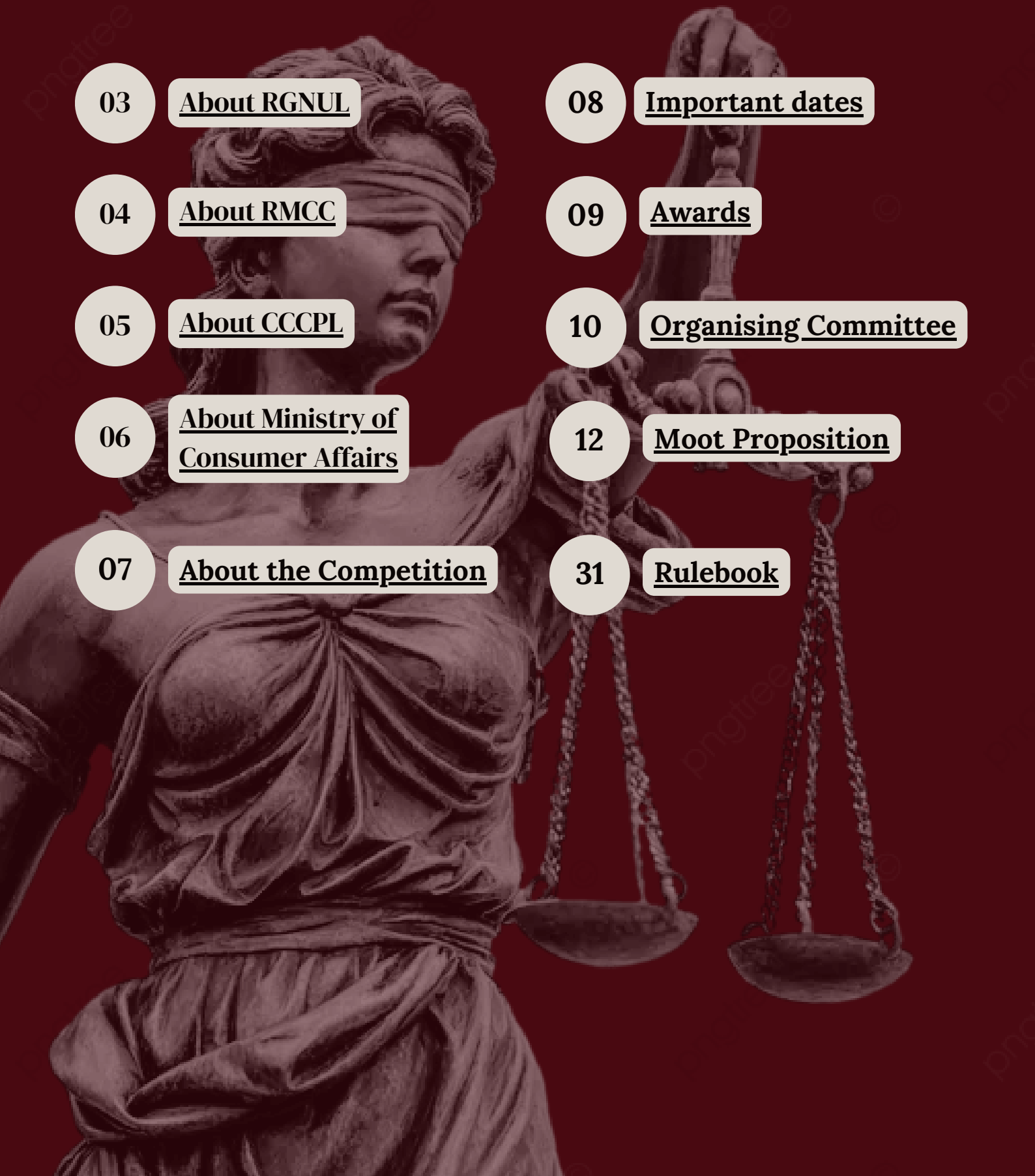
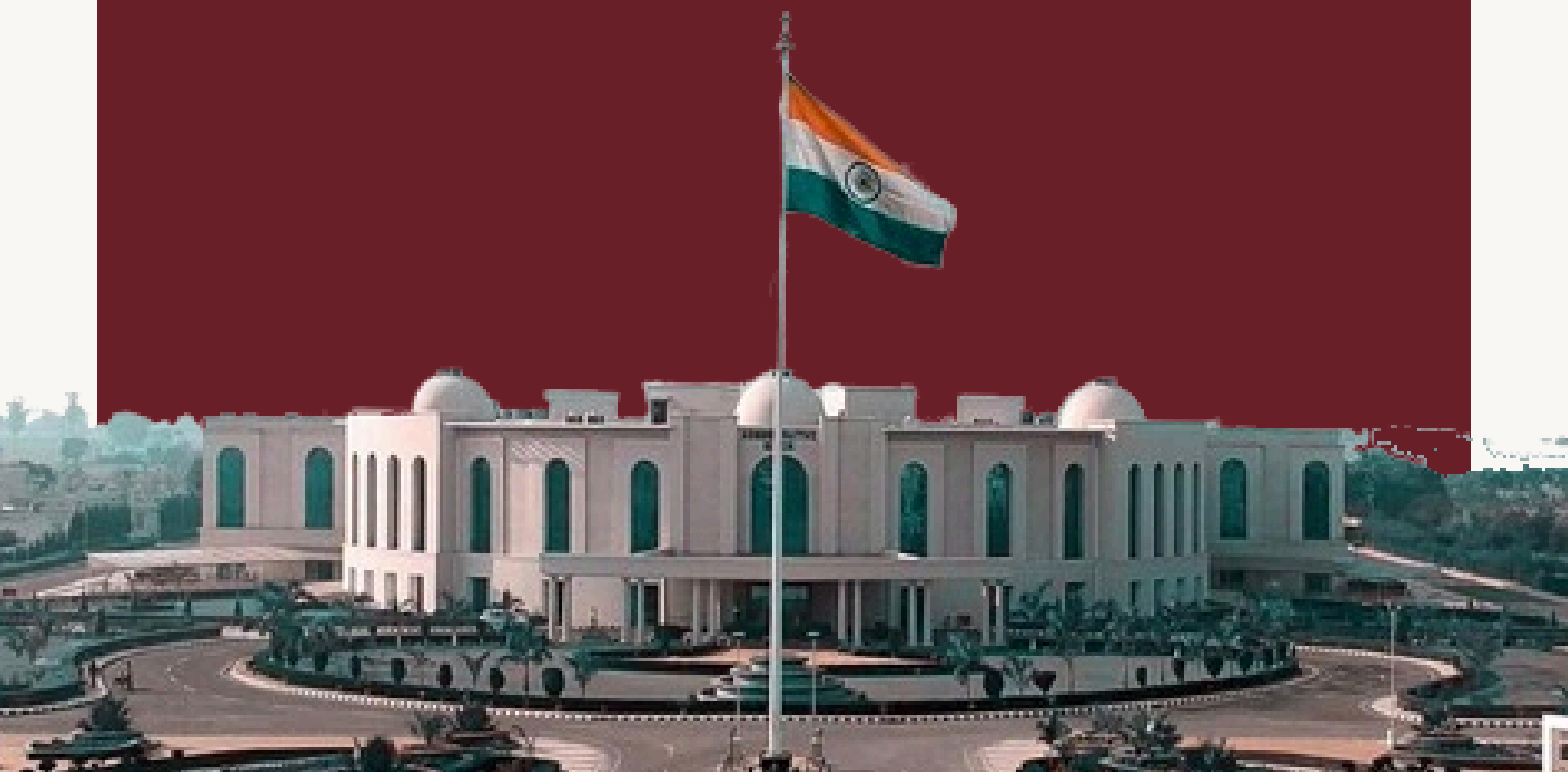


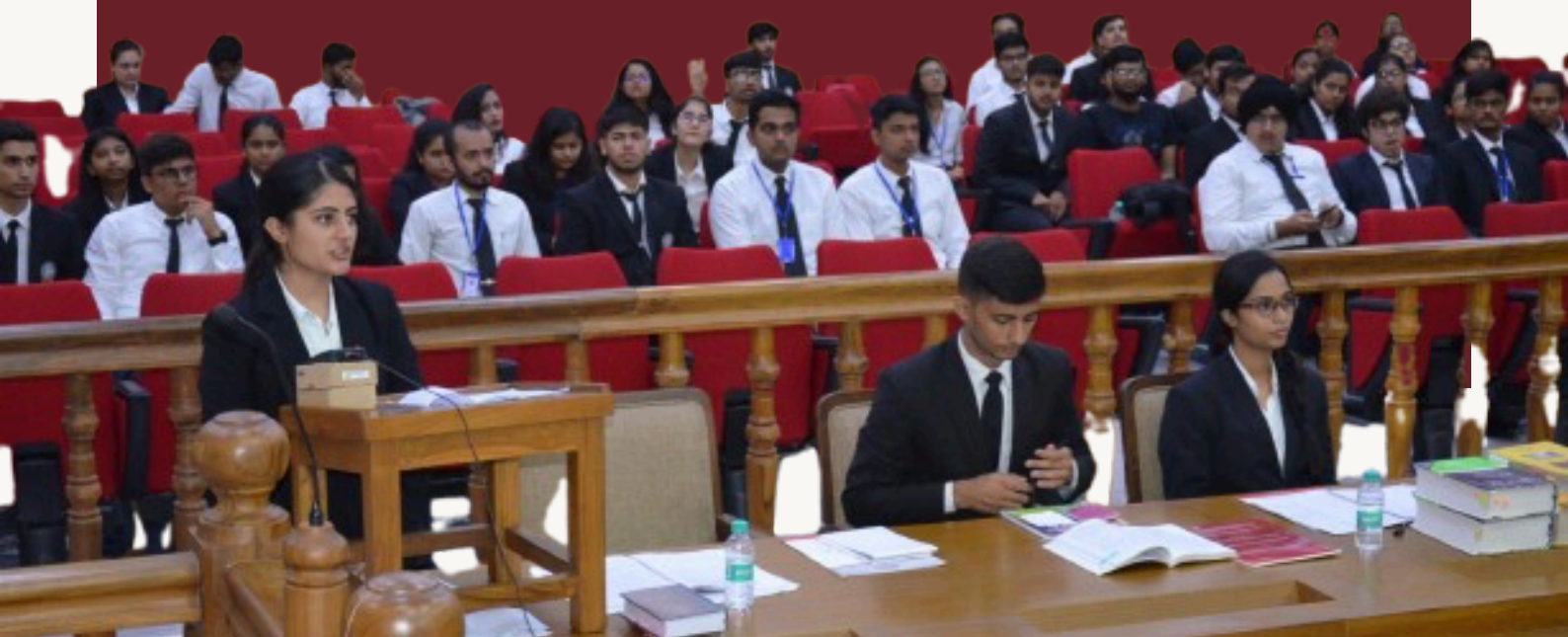
ABOUT RGNUL

The Rajiv Gandhi National University of Law (RGNUL), Punjab, situated in Patiala, was established by the State Legislature of Punjab by passing the Rajiv Gandhi National University of Law, Punjab Act, 2006 (Punjab Act No. 12 of 2006). The Act incorporated a University of Law of national stature in Punjab, to fulfill the need for a Centre of Excellence in legal education in the modern era of globalization and liberalization. In 2015, RGNUL became the first and the only NLU to have been accredited by the National Assessment and Accreditation Council (NAAC) with an 'A' grade. In 2018, RGNUL was amongst the four NLUs to have been granted an autonomous status by the University Grants Commission and has been ranked among the top law schools in India in the National Institutional Ranking Framework (NIRF), by the Union Ministry of Human Resource Development, Government of India.



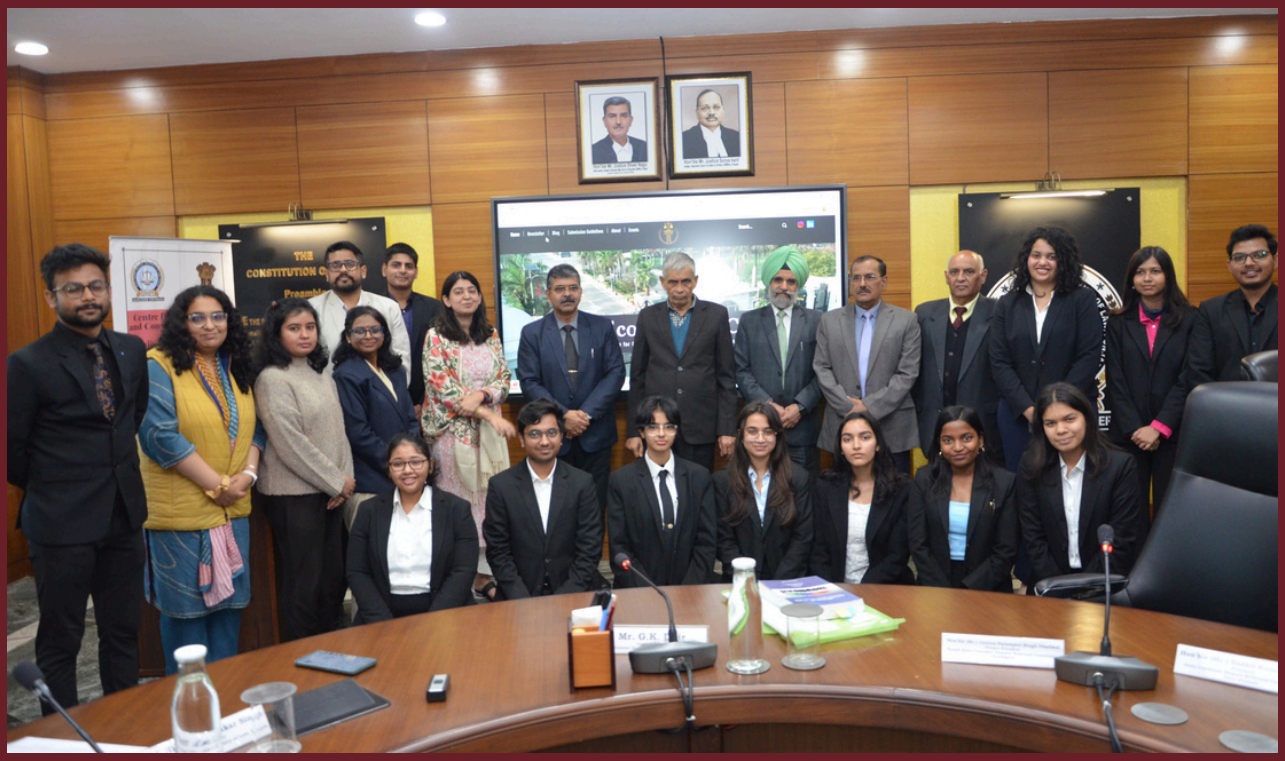
ABOUT RMCC

Rajiv Gandhi National University of Law, Punjab has always envisioned serving the society through reforms in legal services by way of preparing professionally competent lawyers. The current moot is a complete reflection of the motto of our university which is 'knowledge empowers' . Mooting is always an integral part of a law student's life, and thus, finds a very regular mention at our university. To further the mooting culture of our university and to provide the participants with a platform to showcase their advocacy, the University organizes various moot court competitions. The RGNUL Moot Court Committee is one of the leading and most active committees here at RGNUL, the significance of the committee is immense. The committee has been known for organizing various moots and related activities aimed at promoting a positive sense for mooting culture. The committee also facilitates the allotment of various national and international moot court competitions to the teams who proudly represent RGNUL in these competitions.



ABOUT CCCPL

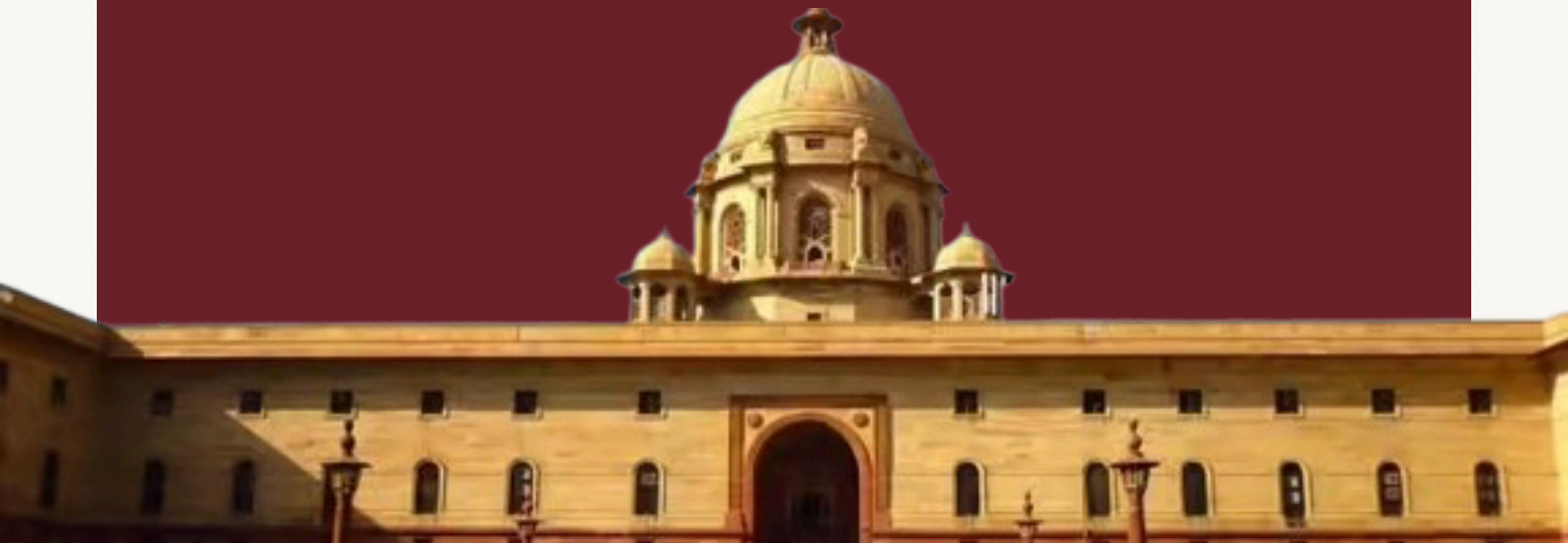
The Centre for Competition and Consumer Protection Law is a research centre dedicated to advancing understanding and promoting awareness of competition and consumer protection laws. This initiative is driven by a passionate group committed to ensuring a fair and competitive marketplace. Through their research and advocacy efforts, the center aims to contribute to the development of sound legal frameworks that protect consumers and foster healthy competition. By engaging in academic research, policy analysis, and outreach activities, the center will play a vital role in shaping the legal landscape and safeguarding the interests of both consumers and businesses.



About Ministry of Consumer Affairs

The Ministry of Consumer Affairs, Food and Public Distribution, Government of India, New Delhi is a pivotal government body tasked with safeguarding and promoting consumer rights and interests in India. Established in 1986, the ministry has evolved significantly over the years, expanding its functions to cover a wide range of consumer-related concerns, such as protection, product safety, and efficient dispute resolution mechanisms. The ministry's foundational goal is to empower consumers by ensuring they have access to safe, reliable, and affordable goods and services. It operates under a clear vision of fostering a consumer-centric market environment, while its mission emphasizes consumer education, awareness, and robust protection frameworks. The ministry actively works with state governments, regulatory agencies such as FSSAI and BIS, industry associations like CII and FICCI, and NGOs to ensure comprehensive consumer protection and create a robust regulatory framework.

The Ministry of Consumer Affairs, Food and Public Distribution, Government of India continues to play a critical role in shaping consumer welfare and promoting a consumer-centric marketplace. Through its strategic initiatives, consumer education programs, and legal reforms, it is committed to empowering consumers and addressing emerging challenges in the rapidly evolving marketplace.

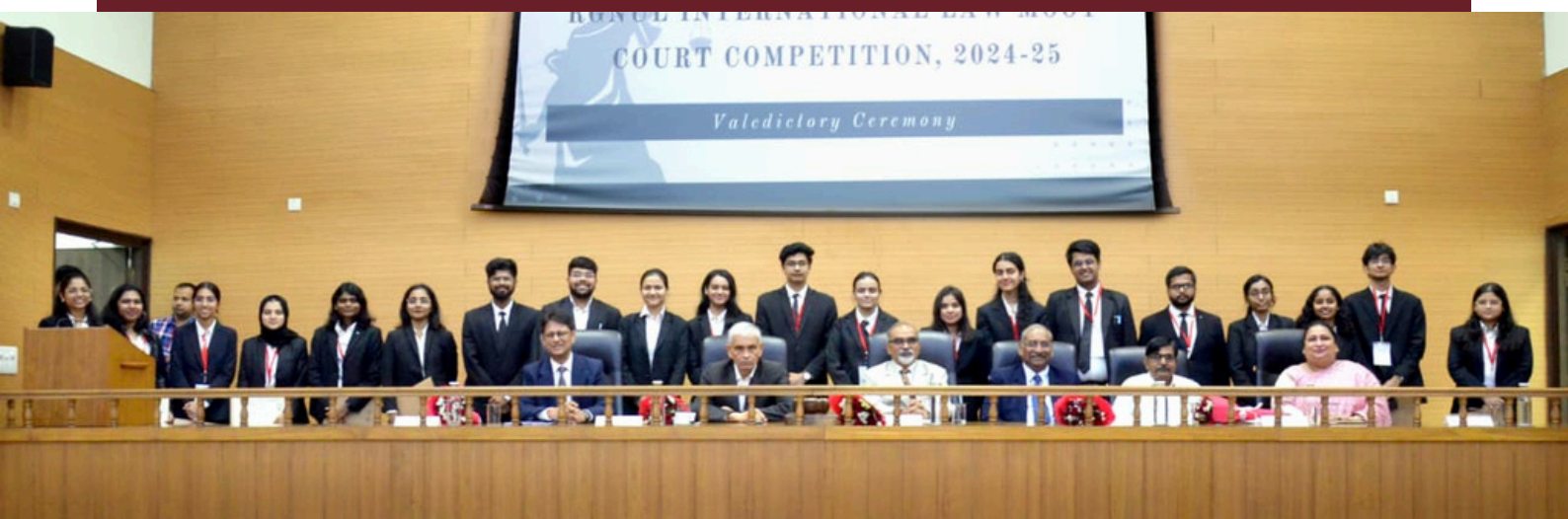


About the Competition

The RGNUL National Moot Court Competition 2026 on Consumer Law stands as a premier platform for future legal professionals to engage with the evolving dimensions of consumer protection in the digital economy. Organized by the RGNUL Moot Court Committee and the Centre for Competition and Consumer Law (CCCPL), RGNUL, in collaboration with the Ministry of Consumer Affairs, Government of India, the competition seeks to cultivate analytical precision, persuasive advocacy, and research excellence among participants.

In a rapidly transforming marketplace where digital transactions and data-driven commerce are redefining consumer relationships, this competition encourages participants to critically examine how the law can safeguard fairness, transparency, and accountability. By simulating complex legal scenarios, it pushes students to think beyond conventional interpretations and propose innovative legal solutions to emerging challenges in consumer protection and regulatory governance.

Conducted in a hybrid format, with preliminary rounds online and advanced stages held on campus, the competition shall focus on contemporary issues such as dark patterns, misleading advertisements, data protection, and product liability. Through rigorous written submissions and dynamic oral rounds before eminent experts, participants will explore the interface between consumer rights and corporate accountability. With attractive prizes and national recognition, this competition aims to inspire thought leadership and advance the discourse on consumer justice in India.



EVENTS TIMELINE

2ND DECEMBER 2025
PROPOSITION RELEASE

15TH JANUARY 2026
REGISTRATION DEADLINE

1ST FEBRUARY 2026
MEMORIAL SUBMISSION

7TH FEBRUARY 2026
PRELIMINARY ROUNDS (VIRTUAL)

20TH - 21ST FEBRUARY 2026
ADVANCED ROUNDS (OFFLINE)

AWARDS

CATEGORY	AMOUNT
1st Position / Winners	40,000/- Trophy + Certificate
2nd Position / Runners up	25,000/- Trophy + Certificate
Best Memorial	15,000/- Trophy + Certificate
Best Speaker (Male)	10,000/- Trophy + Certificate
Best Speaker (Female)	10,000/- Trophy + Certificate

All the Participants will be awarded a Certificate of Participation

ORGANISING COMMITTEE

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Vice Chancellor, RGNUL, Punjab

Patron in Chief & Coordinator CCCPL

Dr. Ivneet Kaur Walia
Registrar (Officiating), RGNUL, Punjab

Patron

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Dr. Manpreet Kaur

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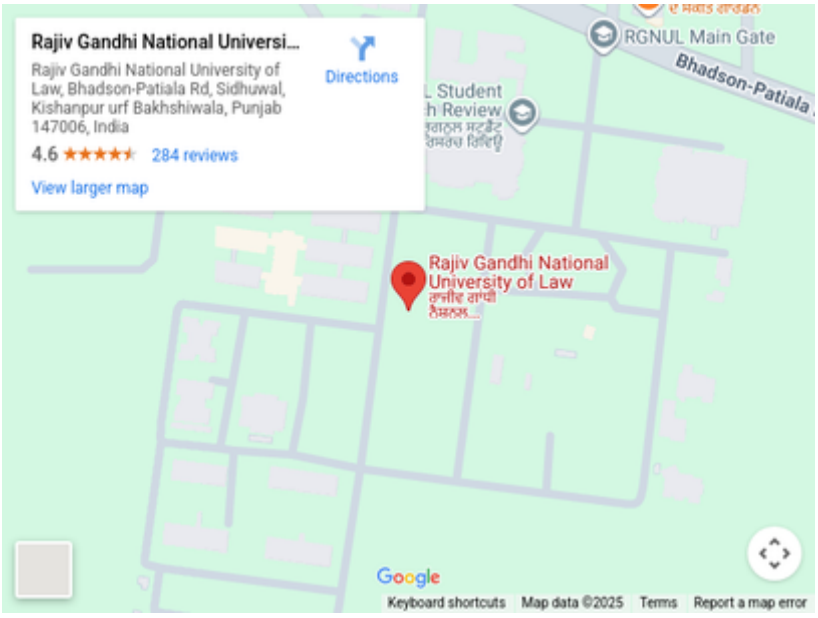
REACH US



MOOT PROPOSITION

RGNUL National Moot Court Competition on Consumer Protection Laws, 2026

IN THE SUPREME COURT OF INDICA

In the Matter of:

People's United Front

v.

Union of Indica and another

I. CONSTITUTIONAL AND LEGAL FRAMEWORK OF INDICA

1. The Republic of Indica is a sovereign, democratic nation comprising twenty-five States and six Centrally Governed Territories. Its constitution, adopted in 1950, establishes a federal structure while firmly entrenching fundamental rights in Part III, reflecting the state's commitment to individual liberty, dignity, and democratic governance. Over the decades, constitutional interpretation in Indica has evolved through an active and dynamic judiciary, which has played a crucial role in expanding the scope and content of these rights in response to changing socio-economic realities.

2. Article 21 of the Constitution guarantees that "no person shall be deprived of life or personal liberty except according to procedure established by law." Through sustained constitutional adjudication over the last seventy years, the Hon'ble Supreme Court of Indica has imparted an expansive and transformative interpretation to Article 21, holding that the right to life is not confined merely to animal existence but encompasses the right to live with human dignity and all that makes life meaningful. In this interpretative process, the Court has also drawn inspiration from international human rights instruments, such as the Universal Declaration of Human Rights (1948) and the International Covenant on Economic, Social and Cultural Rights (1966), thereby harmonising domestic constitutional values with global human rights standards.

3. Article 19(1)(g) of the Constitution guarantees to all citizens the fundamental right to practise any profession or to carry on any occupation, trade or business. However, this right is not absolute. It is expressly subject to Article 19(6), which empowers the State to impose reasonable restrictions in the interest of the general public. Over time, this has enabled the State to regulate commercial activities, especially in sectors directly affecting public health, safety and welfare, while maintaining a constitutional balance between economic freedom and social responsibility.

4. The legislative framework governing this field in Indica is both comprehensive and modern and is substantially pari materia with corresponding Indian legislation. The Consumer Protection Act, 2019, consolidates laws relating to consumer protection and establishes a three-tier quasi-judicial mechanism comprising District, State and National Consumer Commissions. It

incorporates contemporary concepts such as product liability, unfair trade practices and misleading advertisements, thereby providing consumers with effective legal remedies in an increasingly complex marketplace. Complementing this, the Food Safety and Standards Act, 2006 regulates food products, dietary supplements and nutraceuticals, while the Drugs and Cosmetics Act, 1940 governs pharmaceutical products, their manufacture, distribution and marketing. Digital commerce and online consumer protection further fall within the ambit of the Information Technology Act, 2000, along with its subsequent amendments addressing emerging technological realities.

5. In furtherance of consumer welfare, the Central Consumer Protection Authority of Indica issued the Guidelines for Prevention of Misleading Advertisements and Endorsements for Misleading Advertisements in the year 2022. These Guidelines lay down binding standards for advertisements, particularly in sensitive sectors such as health and wellness, and impose obligations not only on manufacturers and service providers but also on advertising agencies, publishers and endorsers. The objective is to prevent the dissemination of false, exaggerated or deceptive claims that may mislead consumers and cause public harm.

6. Subsequently, in December 2023, the Central Consumer Protection Authority issued the Guidelines for Prevention and Regulation of Dark Patterns, 2023, recognising the growing concern regarding manipulative digital practices that compromise consumer autonomy. Issued under Section 18(2)(1) of the Consumer Protection Act, 2019, these Guidelines identify and define a range of unfair design practices in digital interfaces, including false urgency, basket sneaking, confirm shaming, forced action, subscription traps, interface interference, bait and switch, drip pricing, disguised advertisements and excessive nagging. These practices are recognised as deceptive tools aimed at influencing consumer behaviour through psychological manipulation rather than informed choice.

7. The constitutional and judicial approach in Indica has historically sought to balance individual liberties with collective welfare. In this process, the Supreme Court has increasingly adopted proportionality analysis while adjudicating upon fundamental rights, a method similar to that followed in jurisdictions such as Canada, South Africa, and the United Kingdom. This approach ensures that State action restricting fundamental rights must not only pursue a legitimate aim but must also satisfy the tests of necessity, rational connection and least restrictive means, thereby preserving both constitutional freedoms and public interest.

II. BACKGROUND: THE DHIKA PANDEMIC

8. Between August 2024 and March 2025, the Republic of Indica was confronted with an unprecedented public health crisis arising from the outbreak of a novel airborne pathogen designated as the "Dhika virus". The virus was first detected in the northern State of Harwana, and due to its high transmissibility, it spread rapidly across the country within a few weeks. By February 2025, Indica recorded over fifteen million confirmed infections and approximately 200,000 fatalities attributable to the virus. The public healthcare system faced severe strain as hospital beds, intensive care facilities, oxygen supply, and essential medicines became increasingly scarce. Simultaneously, the national economy suffered significant disruption, witnessing a contraction of 7.3% in GDP during the last quarter of 2024.

9. In response to the rapidly deteriorating situation, the Union Ministry of Health and Family Welfare declared a national health emergency in September 2024. State governments across Indica imposed varying degrees of lockdown restrictions, mobility limitations, social distancing norms and mandatory mask regulations. Although vaccination programmes were formally launched in November 2024, supply constraints and infrastructural challenges limited vaccine availability in the initial phase primarily to frontline healthcare workers, senior citizens and vulnerable groups, leaving a large section of the general population without immediate access to immunisation.

10. The pandemic environment generated widespread fear, uncertainty and psychological distress among citizens. The circulation of inconsistent and often contradictory medical information on social media platforms further aggravated public confusion. Alongside scientifically approved advisories, numerous unverified claims regarding traditional remedies, herbal treatments and "miracle cures" began gaining traction among the masses. In such circumstances, public demand for immunity-enhancing products, dietary supplements, personal protective equipment and sanitising products increased exponentially. Several e-commerce platforms reported an approximate four-hundred percent surge in the online sale of health and wellness products between October and December 2024 alone.

11. At the same time, the Union Government was faced with the complex task of balancing urgent public health concerns with the need for economic stability and industrial revival. In furtherance of this objective, the Ministry of Commerce and Industry publicly encouraged domestic manufacturing and private sector participation in the development of health-related products. Official statements promoting "self-reliant health solutions" and the vision of "Atmanirbhar health innovation" were released, urging Indican industries to contribute to national efforts in combating the pandemic through indigenous research and product development.

III. NEXCURE BIOTECH AND IMMUNEX SHIELDZ

12. NexCure Biotech Private Limited is a pharmaceutical and nutraceutical company incorporated in the year 2018, with its corporate headquarters situated in Aurangnagar. The company operates manufacturing facilities across three different states and has primarily focused on the development and marketing of dietary supplements, herbal formulations and general wellness products. Prior to the outbreak of the Dhika pandemic, NexCure had established itself as a mid-sized enterprise in the nutraceutical sector, with an annual turnover of approximately ₹300 crores and a workforce of nearly 800 employees across its manufacturing, research, marketing and logistics divisions.

13. The company is promoted by Dr Vikram Malhotra, an MBBS graduate with a Master's degree in Business Administration, who serves as its Managing Director. NexCure is also supported by several domestic venture capital investors who entered the company during its expansion phase between 2020 and 2022. Until the events forming the subject matter of the present petition, the company had not faced any major regulatory action or compliance violations, and there were no adverse findings against it by regulatory authorities such as the Food Safety and Standards Authority of Indica or the Drug Controller General of Indica.

14. In December 2024, in the midst of the Dhika pandemic, NexCure announced the development of a new product called "Immunex Shieldz", which it internally described as "an advanced immunity support dietary supplement formulated using a proprietary blend of micronutrients, herbal extracts and bioactive compounds designed to strengthen immune response during viral outbreaks." The formulation of the product included Vitamin C at a dosage of 1000 mg, Vitamin D3 at 2000 IU, Zinc at 40 mg, as well as herbal components such as Elderberry extract, Echinacea and Turmeric curcumin. In addition to these ingredients, the company also claimed to have developed a proprietary "ImmunoBoost Complex", the exact composition of which was only partially disclosed on commercial and regulatory documents, citing trade secret protections.

15. For regulatory purposes, NexCure chose to seek approval for Immunex Shieldz under the category of "Health Supplements" from the Food Safety and Standards Authority of Indica, instead of applying for approval as a pharmaceutical drug under the Drugs and Cosmetics Act. Due to the expedited pathways introduced by the Union Government during the pandemic to facilitate faster introduction of health-related products, the application was processed and approved within three weeks. This pathway primarily required demonstration of safety standards and compliance with labelling norms, without mandating rigorous proof of therapeutic efficacy, as is otherwise necessary in the case of drugs.

16. The product label carried on Immunex Shieldz stated that it was a "dietary supplement intended solely to support general immune function and that it was not intended to diagnose, treat, cure or prevent any disease." The label also contained a disclaimer that results might vary from person to person and advised consumers to consult healthcare professionals before use.

17. However, internal corporate documents of NexCure Biotech, later accessed by a public health NGO through a successful Right to Information application, painted a more complex picture. These documents reflected that the company had conducted detailed pre-launch market research, which indicated "extremely high levels of consumer anxiety regarding the Dhika virus and a strong emotional demand for preventive solutions." Business forecasts prepared by the senior management estimated a potential revenue generation of nearly ₹2,000 crores from the sale of Immunex Shieldz in its first year itself. The internal marketing strategy documents allegedly emphasised the need to build an emotional narrative around fear, protection and social responsibility, with a specific focus on creating a sense of urgency and using social proof to influence consumer behaviour.

18. The internal documents further revealed that the company had relied on only limited clinical evaluation prior to the product's launch. It had conducted one small-scale observational study involving 120 participants, which reported increased antibody marker levels in some individuals. However, the study lacked a control group, was not peer-reviewed, and did not establish any causal link between consumption of Immunex Shieldz and protection against Dhika infection. Despite these limitations, the company proceeded with an aggressive commercial rollout.

IV. DIGITAL MARKETING CAMPAIGN

19. NexCure Biotech formally launched Immunex Shieldz on 15 January 2025 through an extensive nationwide digital marketing campaign. The campaign was executed through its proprietary website www.immunexshieldz.in, major e-commerce platforms such as Amizon Indica and Slipkart, several health-specific shopping portals, and across social media platforms including Fakebook, Intagram, Twigger and MeTube. In addition to these, the company deployed influencer marketing networks, affiliated partnerships, targeted email campaigns and SMS promotions directed at specific demographic segments based on age, location, and online health-search behaviour. The overall expenditure on advertising across digital and conventional media reportedly exceeded ₹150 crores, and between January and March 2025 alone, the campaign is estimated to have reached nearly 200 million internet users across the country.

20. The advertising content created by NexCure was carefully designed to resonate emotionally with a population experiencing prolonged fear and uncertainty. Several video

advertisements of two to three minutes duration portrayed distressed families separated by illness, exhausted frontline healthcare workers, children unable to return to school, and elderly individuals isolated in their homes. The advertisements used laboratory imagery, molecular models and animated charts purporting to show "improved immunity levels" after consumption of the product. The accompanying voiceovers carried statements such as "When your family's health cannot wait", "Permanent immunity begins with one decision", "Clinically tested protection", and "The immunity shield Indica trusts", all intended to allegedly build a psychological association between the product and protection against the pandemic.

21. Alongside these video promotions, NexCure extensively used print-style digital banners and social media advertisements. These carried prominent headlines like "Don't Let Dhika Win – Shield Your Family Today", "Immunity That Lasts – Science You Can Trust", and "Join 10 million Protected Indicans". The visuals depicted smiling families, healthy children and elderly persons embracing their grandchildren, creating a strong emotional contrast with the grim pandemic reality. Various badges such as "FSSAI Approved", "Clinically Tested", "Doctor Recommended" and "100% Natural" were displayed prominently. Although none of the advertisements explicitly stated that Immunex Shieldz cured or prevented Dhika infection.

22. The digital purchase interface on NexCure's website and its partner platforms incorporated multiple design elements aimed at influencing consumer decisions. The homepage and product pages displayed large banners claiming "Only 7 bottles left at this price – Order now!" and a live countdown timer stating "Offer ends in 02:47:33", which subsequent investigations found to reset automatically every hour. Customers were repeatedly shown pop-up notifications such as "Ramesh from Mumbai just purchased Immunex Shieldz 3 minutes ago" appearing at frequent intervals, along with a badge stating "153 people are viewing this product right now". Additionally, a map interface displayed location-based Dhika infection statistics with messages such as "12 new Dhika cases in your area today – protect yourself", thereby linking the product directly with the fear of local outbreaks.

23. The purchase options were structured in a manner that subtly directed consumers towards a recurring payment model. The main option displayed was a "Monthly Protection Plan – ₹1,999 per month (Auto-renew for continuous protection)", shown in a large, prominent gold-coloured button accompanied by a shield icon, while the "One-time purchase – ₹2,499" option was displayed in smaller, grey-coloured text beneath it. By default, the monthly subscription option was pre-selected. Immediately below this, in significantly smaller font, a disclaimer stated that the plan would auto-renew and could be cancelled through account settings. Consumers opting for this plan were required to provide credit card details for automatic monthly billing.

24. Several individual consumers later complained that the cancellation process was deliberately complicated and difficult to navigate. To cancel, users were required to log in, locate the "My Subscriptions" section within account settings, select the active subscription, respond to a survey giving reasons for cancellation, respond to a retention offer pop-up, and then reconfirm cancellation. Many consumers reported being charged multiple times, even after attempting cancellation, before finally being able to terminate the subscription.

25. The product page of Immunex Shieldz displayed an average rating of 4.8 out of 5 stars based on over 47,000 "verified" reviews. The top reviews carried highly emotional statements such as "Saved my family", "No illness since starting", "Miracle product" and "Even doctors were surprised". However, a later digital forensic audit revealed that a large portion of these reviews exhibited patterns consistent with bot-generated or incentivised content, including repetitive language structures, clusters of account creation dates around the product launch period, and large volumes of reviews posted within very short time intervals.

26. Numerous consumer complaints were subsequently filed before the Central Consumer Protection Authority and various Consumer Dispute Redressal Commissions across Indica. In these complaints, consumers reported that they felt psychologically pressured into making purchases due to artificial urgency indicators, that they discovered unexpected recurring charges on their payment instruments, and that they had relied on the product's advertised claims while making health and safety decisions for themselves and their families.

27. Parallelly, NexCure engaged around 200 social media influencers across platforms like Intagram, MeTube and various health and wellness blogs. These influencers, with follower bases ranging from 50,000 to over 5 million, were provided free product supplies and paid amounts varying between ₹50,000 and ₹5,00,000 per promotional post, depending on their reach and engagement metrics. Influencer content generally involved unboxing videos, personal testimonials claiming daily personal use for family protection, direct recommendations that "everyone should use this during these times", and discount codes linked to affiliate sales. Subsequent investigations by independent digital media researchers revealed that a majority of these influencer posts failed to carry clear disclosures regarding their commercial relationship with NexCure Biotech, despite mandatory requirements under the CCPA Guidelines on Endorsements and Misleading Advertisements.

V. MARKET IMPACT AND CONSUMER RESPONSE

28. Between 15 January and 31 March 2025, NexCure Biotech sold approximately twelve million units of Immunex Shieldz across the Republic of Indica, generating revenues exceeding

₹2,000 crores within a short span of less than three months. The product rapidly emerged as the highest-selling dietary supplement in the country during this period, surpassing several long-established brands in the nutraceutical market. Its rapid commercial success was widely reported in business media as an example of "pandemic-driven innovation" and "crisis entrepreneurship."

29. Independent market research agencies subsequently conducted nationwide surveys to assess consumer behaviour and perception regarding the product. These studies revealed that approximately sixty-eight per cent of consumers who purchased Immunex Shieldz believed that the product would help prevent infection from the Dhika virus. Around forty-two per cent of respondents admitted that after beginning regular consumption of the supplement, they had reduced or relaxed other preventive measures such as mask-wearing, physical distancing or avoiding public gatherings. Nearly seventy-three per cent of those surveyed stated that their purchase decision was primarily influenced by the company's advertisements and online testimonials, while only a small fraction consulted medical professionals before using the product. About thirty-one per cent of purchasers opted for the monthly subscription plan, and among them, nearly sixty-four per cent reported that they were unaware that the plan would auto-renew and were surprised when recurring deductions appeared on their bank statements.

30. During this period, the Union Ministry of AYUSH briefly featured Immunex Shieldz in certain public communication materials related to "immunity support during pandemic times." Although the Ministry did not endorse the product directly, its inclusion in such promotional content contributed to the perception of official approval among sections of the public. This reference was, however, removed in March 2025 following emerging concerns about the product's claims and ongoing regulatory scrutiny.

VI. ADVERSE HEALTH OUTCOMES AND SCIENTIFIC INVESTIGATION

31. Between February and April 2025, public health authorities began identifying troubling patterns associated with the widespread use of Immunex Shieldz. Several districts reported clusters of Dhika infections among individuals who self-reported regular consumption of the supplement. In a number of hospital admissions, patients disclosed that they had delayed seeking medical help after developing symptoms, under the belief that their consumption of Immunex Shieldz would protect them from severe illness. In parallel, poison control centres across different states received reports of adverse reactions, primarily involving gastrointestinal distress and allergic manifestations linked to the herbal ingredients contained in the product.

32. Epidemiological data compiled by the National Centre for Disease Control indicated that Dhika infection rates among regular Immunex Shieldz users did not differ significantly from those

of the general population. More concerning was the emerging correlation between product consumption and delayed medical intervention, with several individuals postponing testing and treatment due to misplaced confidence in the product's protective claims. In seventy-three reported cases of death, family members informed investigating authorities that the deceased had relied heavily on Immunex Shieldz and had consciously avoided or reduced adherence to standard preventive protocols.

33. In response to these developments, the National Medical Research Board, an autonomous scientific body, initiated a rapid scientific review of the product in March 2025. The Board's findings, published on 28 March 2025, presented a detailed assessment under three key dimensions. From a safety perspective, the Board noted that "the product ingredients are generally recognised as safe at stated dosages. No inherent toxicity or direct harm attributable to product consumption was identified. However, some individuals with specific allergies or medical conditions may experience adverse reactions. Product labelling does not adequately specify contraindications."

34. On the issue of efficacy, the Board concluded that the "available evidence does not support claims of enhanced immunity against Dhika virus or any specific pathogen." "The observational study submitted by the manufacturer lacks methodological rigour: no randomisation, no control group, no peer review, and insufficient sample size." "While vitamins and minerals may support general health, no scientific basis exists for claims of 'permanent immunity' or specific protection against Dhika."

35. From a marketing and communication standpoint, the Board observed that "The aggregate effect of marketing materials, while technically including disclaimers, creates reasonable consumer expectation of specific pandemic protection." "The timing, messaging, and contextual placement of advertisements exploit pandemic anxiety in ways that may compromise informed decision-making."

36. Based on these findings, the NMRB recommended immediate modification of all advertising content relating to Immunex Shieldz, more explicit disclaimers and labeling regarding its limited role as a general health supplement, a complete prohibition on pandemic-specific marketing claims, and a comprehensive investigation into possible violations of consumer protection laws and advertising regulations.

VII. REGULATORY ACTION AND CONSUMER COMPLAINTS

37. On 30 March 2025, the Central Consumer Protection Authority of Indica issued a detailed show-cause notice to NexCure Biotech Pvt. Ltd., calling upon it to explain alleged violations of

the Consumer Protection Act, 2019 and the regulatory guidelines framed thereunder. The notice specifically invoked provisions relating to misleading advertisements and unfair trade practices, particularly Sections 2(47) and 89 in relation to misleading advertisements, and Sections 2(46) and 88 in relation to unfair trade practices. It also cited non-compliance with the Guidelines for Prevention of Misleading Advertisements and Endorsements, 2022, as well as the Guidelines for Prevention and Regulation of Dark Patterns, 2023, issued under the statutory mandate of the Authority.

38. The show-cause notice highlighted several aspects of NexCure's promotional and digital conduct. It noted "Representations creating consumer expectation of disease prevention without adequate scientific foundation", "Use of false urgency indicators, manipulative subscription practices, and interface designs that impair consumer choice", "Deployment of fabricated testimonials and undisclosed paid endorsements", "Exploitation of public health emergency to pressure consumer purchasing decisions."

39. In its reply submitted on 10 April 2025, NexCure Biotech denied all allegations of legal and ethical wrongdoing. It contended that the product had been duly approved by the Food Safety and Standards Authority of Indica under the category of health supplements and that it had complied with all applicable labelling and regulatory requirements. The company asserted that all its advertising materials contained appropriate disclaimers clarifying that the product was not intended to diagnose, treat or cure any disease and that results might vary. It further argued that its marketing strategies and digital interface designs were consistent with prevailing industry standards and were aimed at enhancing user engagement rather than manipulating consumer behaviour. NexCure also submitted that the scientific evidence available at the time was evolving and that its claims were made in good faith based on then-existing knowledge. Invoking its fundamental right to trade and commercial speech under Article 19(1)(g) of the Constitution, the company alleged that the regulatory action amounted to excessive interference in its legitimate business operations.

40. The proceedings before the CCPA did not conclude swiftly, as NexCure simultaneously approached various High Courts across Indica seeking interim protection against coercive action, citing procedural irregularities and urgency. As a result, the regulatory process became entangled in jurisdictional and procedural challenges, leading to delays in final enforcement measures.

41. Parallelly, by April 2025, a large number of individual and representative consumer complaints began to be filed before District and State Consumer Disputes Redressal Commissions across the country. These complaints were instituted both by individual consumers as well as by consumer associations on behalf of affected groups. The complainants alleged that NexCure had

indulged in unfair trade practices by making misleading representations regarding the efficacy of the product, creating artificial scarcity and urgency through digital design strategies, and imposing undisclosed subscription terms resulting in automatic recurring charges. They further alleged deficiencies in service on account of deceptive marketing practices and inadequate disclosure of material information necessary for informed consumer decision-making.

42. In addition to claims of unfair trade practices, several complainants also raised issues of product liability. These included assertions that the product suffered from defects in performance, as it failed to provide the protection that had been represented; that there was a deficiency in service due to misleading communication and lack of proper warnings; and, in certain cases, allegations of manufacturing defects due to reported instances of contamination or inconsistency in composition. A significant grievance raised was the failure of the company to adequately warn consumers about the limitations of the product and its inability to provide specific protection against the Dhika virus.

43. The reliefs sought by the complainants included refund of the purchase price along with interest, compensation for medical expenses incurred due to reliance on the product, damages for mental agony and emotional distress, and in severe cases, compensation for loss of life of family members. Several complainants also sought punitive damages on the ground that NexCure's actions constituted willful and reckless misconduct undertaken in complete disregard of public health.

44. The complaints implicated multiple parties, including NexCure Biotech as the manufacturer, various e-commerce platforms as sellers and facilitators, advertising agencies as entities responsible for creating and disseminating misleading content, and social media influencers as endorsers who failed to disclose their commercial relationships. Preliminary hearings before different Consumer Commissions reflected divergent judicial approaches. While some Commissions observed that dietary supplements, being non-drug products, may not attract strict product liability standards unless direct physical harm from consumption is established, others held that misleading representations regarding performance and efficacy themselves constituted a defect under the product liability framework, especially when such representations influenced health-related decisions. These varying approaches gave rise to complex legal questions concerning the burden of proof, standards for consumer reliance, and the appropriate scope of remedies under consumer law.

VIII. EMERGENCE OF PUBLIC INTEREST LITIGATION

45. The growing sense of public dissatisfaction with the slow pace of regulatory action and the limitations of individual consumer remedies led to the emergence of a broader collective response in April 2025. A coalition called the People's United Front was formed, consisting of families of forty-seven deceased individuals who had consumed Immunex Shieldz, along with representatives from twelve consumer rights organisations, healthcare workers, medical professionals, digital rights advocacy groups and public health researchers. Although the Front was not formally registered as a legal entity under any statutory framework, it functioned as a voluntary association united by common objectives of seeking justice for affected families, demanding stronger regulation of health-related advertising during public emergencies, ensuring accountability for digital manipulation practices, and preventing the commercial exploitation of public health crises in the future.

46. The People's United Front filed a writ petition under Article 32 of the Constitution before the Hon'ble Supreme Court of Indica on 15 April 2025. In the petition, the Union of Indica was arrayed as Respondent No. 1, represented through its Ministries of Health and Family Welfare, Consumer Affairs, and Electronics and Information Technology, with NexCure Biotech Private Limited being impleaded as Respondent No. 2. The petitioners contended that the magnitude of the harm caused, the systemic nature of the regulatory failure, and the constitutional dimensions of the issues involved warranted the exercise of the Supreme Court's extraordinary jurisdiction.

47. In their petition, the People's United Front sought a series of declaratory reliefs, including a declaration that the conduct of NexCure Biotech violated the fundamental right to life and health guaranteed under Article 21 of the Constitution, and that the regulatory inaction, delayed response and initial public references by the Union of Indica amounted to a breach of its constitutional duties towards citizens. They further sought a declaration that the marketing practices employed by NexCure, including the use of dark patterns and manipulative digital design, constituted unfair trade practices and prohibited commercial behaviour under the Consumer Protection Act, 2019 and the relevant guidelines issued by the Central Consumer Protection Authority.

48. Alongside these declaratory reliefs, the petitioners prayed for various injunctive directions, including the immediate recall of Immunex Shieldz from the market, a prohibition on any further marketing or sale of the product pending comprehensive scientific validation of its efficacy, and cease-and-desist orders against the continued use of identified dark patterns in its digital interfaces. They also sought directions for the blocking and removal of misleading promotional content from digital platforms and social media channels where the product had been marketed.

49. Further, the petition prayed for compensatory remedies in the form of the establishment of a dedicated compensation fund of ₹500 crores for families of individuals who had suffered

serious harm or loss of life after relying on the product, a structured refund mechanism for all purchasers of Immunex Shieldz, and imposition of punitive damages against NexCure Biotech for its alleged willful and reckless conduct.

50. In addition to these immediate remedial measures, the People's United Front also sought broad structural reforms from the Union of Indica. These included directions for strengthening the regulatory framework governing health product advertising during public health emergencies, introduction of mandatory algorithmic transparency norms for online marketing of health-related products, enhanced disclosure and labeling requirements for dietary supplements, and the creation of a fast-track mechanism within the consumer dispute redressal system for pandemic-related consumer grievances. The petition also sought directions for the launch of nationwide public awareness campaigns to counter misinformation that had already been disseminated during the Dhika pandemic.

51. To support its claims, the petition appended extensive documentary and expert evidence. This included the scientific report of the National Medical Research Board, recorded screenshots and archived video advertisements of the product, digital forensic analyses of NexCure's website interface and online review patterns, and sworn testimonies from families of affected individuals. Affidavits from medical experts, consumer psychologists and digital rights researchers were also filed. Additionally, the petition contained a comparative analysis of regulatory responses from jurisdictions such as the European Union, the United Kingdom, the United States and Australia in relation to misleading pandemic-related health advertising and digital manipulation practices.

IX. RESPONDENTS' DEFENSES

NexCure Biotech's Position

52. Following the institution of the writ petition, NexCure Biotech Pvt. Ltd. filed a detailed counter-affidavit before the Hon'ble Supreme Court of Indica on 1 May 2025, denying all allegations of illegality, constitutional violation or unfair trade conduct. The company asserted that it had fully complied with the regulatory approval process prescribed for dietary supplements under the Food Safety and Standards framework, and that Immunex Shieldz contained ingredients which were widely recognised as safe under existing scientific and regulatory standards. It emphasized that all statutory labelling requirements were strictly followed and that appropriate disclaimers were prominently displayed on the product packaging and in all advertising material, clarifying that the product was not intended to diagnose, treat or cure any disease. According to NexCure, its labelling and advertisement practices fully conformed to the Food Safety and Standards (Advertising and Claims) Regulations, 2018.

53. With respect to scientific responsibility, NexCure contended that its representations were made in good faith based on available scientific literature on immunity-supporting micronutrients and herbal ingredients. It highlighted the fact that the pandemic presented a rapidly evolving scientific landscape marked by uncertainty, where definitive conclusions were difficult to establish in real time. The company argued that it had relied upon preliminary research, external scientific consultants and available studies in developing its marketing claims, and that it had never explicitly stated that the product would cure or prevent Dhika infection but had only claimed that it would support general immunity. NexCure further pointed out that numerous similar products with comparable claims remained widely available in the market and that selectively targeting its product would be arbitrary and discriminatory.

54. On the constitutional dimension, NexCure asserted that its marketing activities constituted legitimate commercial speech protected under Article 19(1)(g) of the Constitution of Indica. It argued that emotional advertising, use of family-oriented narratives, and aspirational representation were standard practices across industries and not inherently manipulative or unlawful. The company further submitted that digital interface elements such as countdown timers, urgency indicators and subscription models were commonplace in e-commerce ecosystems and served primarily to enhance user engagement and consumer convenience. According to NexCure, excessive regulatory interference in such practices would stifle innovation, distort competition and violate the company's fundamental right to carry on business.

55. NexCure also invoked the principle of consumer autonomy. It argued that adult consumers in a democracy are presumed to possess the capacity to evaluate advertising claims, exercise discretion and make informed choices. It claimed that its disclaimers were sufficient to notify consumers about the limitations of the product and that consumers had the freedom to consult healthcare professionals before making purchasing decisions. The company contended that individual health behaviours result from a multitude of factors and could not be attributed solely to exposure to a particular advertisement or product. It therefore denied any causal link between its marketing practices and the alleged adverse health outcomes.

56. Further, NexCure raised serious objections regarding causation and liability. It urged that Dhika infections were caused by viral exposure and biological susceptibility, not by the consumption or marketing of its product. It is submitted that a claim for product liability could not be sustained in the absence of proof that the product itself caused physical harm. According to the company, economic loss, emotional distress, or disappointment arising from unmet expectations did not constitute sufficient grounds for liability without demonstrable product defect or hazardous content. NexCure also argued that changes in individual behaviour, such as reduced

adherence to preventive measures, constituted independent and intervening acts breaking the causal chain.

57. On procedural grounds, NexCure challenged the maintainability of the writ petition. It contended that a public interest litigation was inappropriate in matters where adequate alternative remedies existed under the consumer protection framework. It argued that the pending proceedings before the Consumer Commissions and the CCPA already provided appropriate statutory forums for adjudicating disputes relating to unfair trade practices and misleading advertisements. The company further contended that constitutional courts should not be converted into parallel regulatory authorities for commercial disputes, especially when specialised statutory mechanisms were already in place. It also questioned the locus standi of the People's United Front on the ground that it was an unregistered association lacking legal personality.

58. In support of its contentions, NexCure referred to comparative international jurisprudence. It cited decisions of the United States Federal Trade Commission, which impose a high threshold for characterising commercial conduct as "deceptive practices". It also relied upon rulings of the United Kingdom's Advertising Standards Authority, where restrictions on health-related advertisements were applied only in cases of clear falsehood rather than ambiguity. It referred to European Union case law on proportionality and commercial speech, and Australian jurisprudence on consumer responsibility and the doctrine of commercial puffery.

Union of Indica's Position

59. The Union of Indica filed its counter-affidavit on 5 May 2025, taking a nuanced and institutionally defensive position. It contended that Indica already had a comprehensive statutory framework governing consumer protection, health product regulation and digital commerce. It emphasized that the expedited approval pathways introduced during the pandemic were policy decisions taken in extraordinary circumstances to balance the urgent need for innovation, economic revival and public health protection. The Union further pointed out that the CCPA had already initiated proceedings against NexCure and that the regulatory machinery was actively functioning, though constrained by procedural safeguards and legal challenges.

60. The Union asserted that its general statements in support of "self-reliant health solutions" were part of broader economic and public policy communication and were not specific endorsements of Immunex Shieldz or any other particular product. It argued that regulatory decisions concerning advertising content, digital interface design and health product approval involved complex scientific and policy considerations and therefore lay primarily within the domain of the executive. It contended that courts, while exercising constitutional jurisdiction, must

adopt institutional restraint and should not substitute their own judgment for that of specialised regulatory bodies, especially in matters involving evolving scientific knowledge.

61. From a constitutional perspective, the Union argued that a violation of Article 21 requires state action that directly deprives a person of life or personal liberty. In the present case, the alleged harm arose from private commercial conduct, not direct state action. While it acknowledged that the State has positive obligations under Article 21, it contended that such obligations are context-specific and must be assessed in light of available resources, institutional constraints and competing policy priorities. According to the Union, the existence of a statutory regulatory framework and ongoing enforcement action demonstrated that the State had not abdicated its constitutional duties.

62. Regarding the petitioners' prayer for restrictive measures, the Union expressed concern that sweeping directions such as immediate product recall or blanket advertising bans would have disproportionate economic consequences, particularly during a fragile post-pandemic recovery phase. It argued that less restrictive alternatives such as enhanced labelling requirements, stronger disclaimers and public awareness campaigns could achieve the same objectives without unduly infringing on the fundamental right to trade under Article 19(1)(g). The Union also cautioned that concepts like "dark patterns", although important, were still evolving in regulatory practice, and overly vague standards could lead to arbitrary enforcement and legal uncertainty for businesses.

63. On the question of causation, the Union submitted that the spread of a pandemic involves complex and multifactorial determinants, including virus mutation, individual immunity, social behaviours and healthcare access. It argued that attributing specific infections or deaths solely to regulatory inaction or commercial advertising was speculative and legally unsustainable. It also contended that individual health decisions are influenced by a range of social, psychological and economic factors, making direct causal linkage extremely difficult in legal terms.

64. In support of its constitutional reasoning, the Union relied on comparative constitutional jurisprudence, referencing the Canadian Supreme Court's Oakes test for proportionality in rights adjudication, the South African Constitutional Court's approach to positive obligations under the right to health, the European Court of Human Rights' jurisprudence on state responsibility in health emergencies, and United States Supreme Court decisions on balancing commercial speech with regulatory objectives.

X. PENDING PROCEEDINGS AND CONSOLIDATION

65. In view of the significant constitutional, technological and consumer law questions raised in the present matter, the Hon'ble Chief Justice of Indica, on 10 May 2025, constituted a five-judge

Constitution Bench to hear and decide the writ petition. The constitution of a larger bench was considered necessary in light of the potential ramifications of the case on commercial regulation, public health governance, digital consumer protection and the evolving contours of fundamental rights in the digital economy.

66. Recognising that the issues before the Court were not confined solely to abstract constitutional questions but also engaged concrete consumer grievances, the Court passed an order directing the consolidation of the Article 32 petition with a limited number of representative consumer complaints that raised common and overlapping questions of law. This consolidation resulted in the creation of a hybrid proceeding, combining its constitutional jurisdiction with its appellate supervisory role over statutory consumer protection mechanisms, in order to ensure a comprehensive and coherent adjudication of the entire controversy.

67. The Court also granted leave to several stakeholders to intervene in the proceedings in order to represent broader systemic interests affected by the outcome of the case. E-commerce platforms were allowed to intervene seeking clarity on the scope of intermediary liability in cases involving misleading health product advertisements. Pharmaceutical industry associations were heard on concerns relating to regulatory uncertainty and the chilling effect of broad restrictions on innovation and investment. Digital rights organisations were granted an opportunity to present submissions emphasising consumer autonomy, algorithmic accountability and transparency in platform design. Medical associations and public health bodies were also permitted to intervene, focusing on the scientific standards of health communication, ethical responsibilities in public health messaging and the consequences of misinformation during health emergencies.

XI. ISSUES FOR DETERMINATION

The Constitution Bench[1] has framed the following four issues for adjudication:

ISSUE I: MAINTAINABILITY AND STANDING

Whether the present Public Interest Litigation is maintainable under Article 32 of the Constitution?

ISSUE II: CONSTITUTIONAL RIGHTS, STATE DUTIES, AND REGULATORY OBLIGATIONS

Whether the conduct of Respondent No. 2 (NexCure Biotech) and the actions/omissions of Respondent No. 1 (Union of Indica) violate Article 21 of the Constitution?

[1] All relevant laws are pari materia with those in India. Judicial decisions from jurisdictions across the globe may be referenced for supporting arguments.

ISSUE III: DIGITAL MARKETING PRACTICES, DARK PATTERNS, AND UNFAIR TRADE PRACTICES

Whether the digital marketing practices employed by NexCure Biotech constitute unfair trade practices, misleading advertisements, or prohibited dark patterns under the Consumer Protection Act, 2019?

ISSUE IV: PRODUCT LIABILITY, CAUSATION, AND REMEDIES

Whether NexCure Biotech is liable under the product liability provisions of the Consumer Protection Act, 2019, for harm suffered by consumers?

RULEBOOK

RGNUL National Moot Court Competition on Consumer Protection Laws, 2026

I. DEFINITIONS

1. Definitions: Unless otherwise provided, the words used in the rules shall be construed as hereinafter provided-

1.1. **"Administrator"** means the administration of the Rajiv Gandhi National University of Law, Punjab and shall also include the members of the RGNUL Moot Court Committee;

1.2. **"Advanced Round"** means the Final Round, Semi-Final Rounds, Quarter-Final Rounds, and the Octa-Final Rounds of the Competition;

1.3. **"Bench"** refers to the members duly invited to adjudge the oral rounds, individually or collectively;

1.4. **"Committee"** means the RGNUL Moot Court Committee;

1.5. **"Clarifications"** refer to the explanations to the Proposition issued by the Administration and published on the official website of the moot pursuant to Rule 17;

1.6. **"Competition"** means the RGNUL National Moot Court Competition on Consumer Laws, 2026;

1.7. **"Memorial"** means the written arguments submitted by each team, submitted according to these Rules;

1.8. **"Oral Round"** means a team's pleadings, comprising two oralists, submitted orally in front of the bench, on behalf of one of the parties against another team representing the opposing party;

1.9. **"Participating Team"** means the team which is eligible to participate in the Competition after completion of the registration procedure;

1.10. **"Participating Institution"** shall be the parent institution of the participating teams;

1.11. **"Proposition"** means the hypothetical Moot Proposition of the Competition released by the Administration. Clarifications as defined under Rule 17 shall form a part of the problem;

1.12. **"Penalty"** refers to the deductions imposed on the memorial scores of a participating institution, as provided for under Rule 20;

1.13. **"Petitioner"** means the side that argues on behalf of the Petitioner at any given point in the Competition;

1.14. **"Plagiarism"** means the direct or substantial duplication of somebody else's work, represented as one's own, without properly acknowledging the same by giving a citation or adding quotation marks;

1.15. **"Preliminary Rounds"** means the oral rounds which take place before the advanced round, as defined under Rule 35 and for the purpose of determining which teams qualify for the advanced rounds.

1.16. **"Rebuttals"** refer to the arguments presented by the Petitioner in response to the Respondent's submissions at the end of the main pleadings of all the oralists;

1.17. **"Respondent"** means the side that argues on behalf of the Respondent at any given point in the Competition.

1.18. **"Scouting"** means a person observing the Oral Rounds of a team other than the team such person is associated with;

1.19. **Oralist"** refers to a participant who presents oral arguments in any given round;

1.20. **"Sur-rebuttal"** refers to the defence presented by the Respondent to the rebuttals as defined in Clause 1.17;

1.21. **"Team Code"** refers to the code allocated to a participating institution by the administrator after completion of the Registration according to Rule 10.

II. INTERPRETATION

2. The Administrators will have the exclusive authority to interpret the Rules in the interest of fairness and equality. The interpretation placed upon these Rules by the Administrators shall be conclusive and the decision of the Administrators regarding the application of these Rules shall be final.

III. Mode of the Competition

3. The Preliminary Rounds of the Competition shall be held **virtually** on 7th February, 2026 through Cisco Webex Software. The Administrators reserve the right to switch the mode of the Competition. The participants will be notified in advance of the mode of the Competition in case of any modifications.

4. The Advanced Rounds of the Competition shall be held **on campus** from 20th to 21st February, 2026.

IV. Eligibility & Team Composition

5. Participation is strictly restricted to bona fide law students pursuing the three years or five years LL.B. degree course in any institution in India. Students pursuing their LL.M. and Diploma courses are not eligible for participation.

6. A recognized institution shall be entitled to send only one team to the competition.

7. Each participating team should have three members. In a team, two members shall be designated as 'Oralists' or 'Speakers' and the third member shall be designated as 'Researcher'.

8. Once registered, a team will not be permitted to vary the composition of the team in any manner. Changes, if any, may only be made with the express permission of the Administrators (at their discretion), if due reason is shown for the same.

9. Any changes with respect to the contact details of the participants shall be notified to the Administrators with immediate effect.

10. Each team which has successfully completed the Registration requirements under the Rules shall be allotted a unique Team Code. Once the Code is allotted, every team must use this team code for any further communication(s) with the Administrators during the entire course of the Competition.

V. REGISTRATION

11. The registration for the moot shall open on **1st December, 2025**. A total of **32 slots** are available for the moot, meaning thereby that the registration for the moot shall take place on a first-come-first-serve basis.

12. All the participating institutions have to confirm participation by filling the registration form via this registration link on or before **15th January, 2026, 11:59 PM IST.**

13. In furtherance to this, the participating Universities are required to send a detailed mail consisting the details of the participating members along with an Authorization Letter/Mail.

14. The participating teams are not required to pay any registration fees at the time of registration for the Preliminary Rounds. The registration fee for the Advanced Rounds shall be INR 6000/- (plus GST) which shall be paid after qualifying to the Advanced Rounds. This fee is inclusive of accommodation for 3 days (19th, 20th & 21st February, 2026).

15. The teams qualifying for the Advanced Rounds will be required to make the payment of the registration fee by 10th February, 2026. Any delay in making this payment shall result in disqualification of the team from the Advanced Rounds and the next team with the highest score in the Preliminary Rounds will qualify for the same.

VI. CLARIFICATIONS

16. The last date for submitting clarifications to the Moot Proposition is 17th January, 2026. All such requests must be submitted through this google form only.

17. The request for clarifications should be clear and related to the facts of the case and not related to the substantive arguments.

VII. MEMORIALS

18. Each team must prepare one Petitioner Memorial and one Respondent Memorial. The language of all the Memorials must be English. The Memorials shall contribute to deciding the outcome of a match in the preliminary rounds in a manner described in Rule 27.

19. Submission of Soft Copies of Memorials:

19.1. All team shall send a soft copy of Memorials for each side in both MS Word and PDF formats, latest by **11:59 PM IST on 1st February, 2026**. The submission shall be made via this google form only.

19.2. Any submission made after the said deadline, unless extended, shall be considered as late submission and penalized. A penalty of 2 marks per hour, up to 24 hours past the deadline, shall be deducted in case of delay in the submission of soft copy of written submissions. A further penalty of 1 mark per day per side shall be levied in case of delay in submission of hard copy of written submission.

19.3. Each Memorial should be contained in a single file with the name of the file being the allocated team code followed by the first letter of the party whose arguments are presented in that Memorial, i.e., an P for Petitioner and R for Respondent. For instance, the Petitioner memorial of team code 9 should be named "TC 9P".

19.4. A penalty of 1 mark shall be levied in case the written submission is submitted in any other format.

20. Submission of Hard Copies of Memorials:

20.1. Only teams qualifying to the Advanced Rounds are requested to submit hard copies of their Memorials on the day of Draw of Lots for the Advanced Rounds. Teams will have to provide the Administrators with **four copies**. The hard copies of written submissions must be an exact replica of the soft copies submitted to the Administrators. Any difference in the same will result in penalties.

21. General Conditions for Memorials:

21.1. The Memorials shall not contain any form of identification apart from the team code. If any such identification or mark, symbol, etc. which has the effect of identifying the team is found on the Memorials, then it shall result in instant disqualification of the participating team.

21.2. Petitioner's Memorials are required to have a Blue cover page and the Respondent's Memorials are required to have a Red cover page.

21.3. A penalty of 1 mark per side shall be levied in case the team uses the wrong cover page of the Memorial.

22. Guidelines for the Format of Memorials:

22.1. The Memorials must contain the following components in the order listed below:

22.1.1. *Cover Page*: The cover page shall contain the case title, side of the Memorial, year of Competition, name of the forum and team Code on top right corner.

22.1.2. *Table of Contents*

22.1.3. *List of Abbreviations*

22.1.4. *Index of Authorities:* The Index of Authorities must list all the authorities cited in the Memorial. The Index must indicate the page number(s) and/or the paragraph number(s) of the Memorial in which the authority is cited.

22.1.5. *Statement of Jurisdiction*

22.1.6. *Statement of Facts:* The Statement of Facts must contain a concise statement of the relevant facts of the dispute. As far as may be, the Statement of Facts should be limited to the stipulated facts and legitimate inferences which can be drawn from those facts. Argumentative facts are prohibited. Statement of Facts shall not exceed 2 pages. Non-compliance will result in a penalty of 1 mark for each exceeded page.

22.1.7. *Issues Raised*

22.1.8. *Summary of Arguments:* The Summary of Arguments should contain a summary of the substance of the arguments. The Summary of Arguments should not exceed 2 pages. Non-compliance will result in a penalty of 1 mark for each exceeded page.

22.1.9. *Pleadings/Arguments Advanced:* All legal arguments must be limited to the Pleadings/Arguments Advanced section the written submission. Non-compliance will result in a penalty of 2 marks. The Pleadings/Arguments

Advanced and Prayer must not exceed 20 pages. Non-compliance will result in a penalty of 1 mark per exceeded page.

22.1.10. *Prayer:* Non-compliance with respect to clauses (1) to (8) and (10) will result in a penalty of 1 mark for each missing section. Non-compliance with respect to section (9) will result in the Memorial not being considered for evaluation at all.

22.2. **Team Code**: The team code must be ascribed on the top right corner of the cover page. The code must be succeeded by the side for which the Memorial is prepared. The teams must use "P" for Petitioner / "R" for Respondent. For example; in case the Team Code is 36 the team must write "TC 36P" in case of Memorial for Petitioner and "TC 36R" in case of Memorial for Respondent.

22.3. **Margin:** The Memorial must maintain an equal margin of 1 inch on all sides. Non-compliance will result in a penalty of 1 mark each side of Memorials.

22.4. **Font, size and line spacing:** The text font should be Times New Roman or Garamond, size 12 and must be in 1.5 line spacing. Non-compliance will result in a penalty of 0.5 mark per incorrect format of font, size and line spacing with a maximum of 2 marks per page of the Memorial.

22.5. **Footnotes:** The footnotes must be in font Times New Roman or Garamond, size 10 and singly spaced. Footnotes must conform to the Oxford University Standard for Citation of Legal Authorities (OSCOLA), 4th Edition in the Memorials throughout. Non-compliance will result in a penalty of 1 mark per page. Substantive/Speaking footnotes are strictly prohibited. Non-compliance will result in a penalty of 1 mark per substantive citation.

22.6. **Header and Footer:** The font used for the header/footer, if any, shall be Times New Roman or Garamond, size 10, 1 spacing. Non-compliance will result in a penalty of 1 mark per page of the Memorial.

22.7. **Page Limit:** There is no maximum page limit on the Memorial and the Pleadings/Arguments Advanced shall be of a maximum of 20 pages. No annexures, photographs, exhibits, etc. should be added to the written submission.

23. Plagiarism: In case instances of plagiarism are found in a certain memorial, the participating institution alleged to have committed plagiarism will be served a show cause notice by the Administrators. If found guilty of plagiarism, the Administrators may impose any sanction that they may deem fit, including disqualification from the Moot.

24. Memorial Evaluation Criteria:

SL. NO.	CRITERIA	MARKS ALLOTTED
1	**Evidence of Original Thought**	**20**
2	**Knowledge of Law and Facts**	**20**
3	**Proper and Articulate Analysis**	**20**
4	**Clarity and Organization**	**10**
5	**Extent and Use of Research**	**10**
6	**Correct Format and Citation**	**10**
7	**Grammar and Style**	**10**
	TOTAL	**100**

VIII. ORAL ROUNDS

25. The Competition shall consist of the following rounds:

25.1. Preliminary Rounds; and

25.2. Advanced Rounds:

25.2.1. Quarter Finals

25.2.2. Semi Finals

25.2.3. Finals

26. During each of the abovementioned rounds, the order in which the teams shall present their arguments is as follows:

26.1. Petitioner Speaker 1;

26.2. Petitioner Speaker 2;

26.3. Respondent Speaker 1;

26.4. Respondent Speaker 2;

26.5. Rebuttal and Sur-rebuttal. Rebuttals shall be permitted only at the discretion of the Bench.

27. Speaker Score: The score shall be determined on the basis of the individual aggregate score of the speaker taken only from the Preliminary Rounds. Individual Aggregate Score shall be determined as the sum of the following:

27.1. Score of Speaker in Preliminary Round I;

27.2. Score of Speaker in Preliminary Round II; and

27.3. Half of Memorial Score

28. The Researcher shall not be permitted to address the Bench during the Oral Rounds. The Researcher may however, be permitted to pass notes to the Speakers at the discretion of the Judges. Such notes shall be passed through the court clerks present in the court room.

29. Participants may use their own bare acts, print outs and commentaries provided that anonymity is not violated during the Rounds.

30. The decision of the Judges as to the marks allotted to each team shall be final and binding.

31. Teams shall notify the Court clerks of the division of time between the 2 Speakers (including time reserved for Rebuttal & Sur-rebuttal) prior to the commencement of the Rounds. Once so informed, these timings shall not be changed.

32. The Judges, at their discretion, may extend the time limits stated. The finality of the decision as to the time structure and the right to allow Rebuttals or Sur-rebuttals shall vest with Judges.

33. Oral Round Scoring Criteria:

Sl. No.	Criteria	Marks Allotted
1	**Knowledge of Law**	**10**
2	**Logic and Reasoning**	**10**
3	**Organization and Clarity**	**10**
4	**Persuasiveness**	**10**
5	**Deference to Court**	**10**
6	**Proper and Articulate Analysis of Issues**	**10**
7	**Understanding of Relevant Legal Principles**	**10**
8	**Knowledge and Use of Legal Authorities and General Principles of National Law**	**10**
9	**Ingenuity, Analogous Reasoning and Ability to Answer Questions**	**10**
10	**Reference to Written Submissions**	**10**

IX. Structure of Oral Rounds

34. Preliminary Rounds:

34.1. Every team shall argue twice in the Preliminary Rounds, once for the Petitioner and once for the Respondent. No two teams shall face each other more than once in the Preliminary Rounds.

34.2. The match-up of teams in Preliminary Rounds shall be determined on the basis of draw of lots. Draw of lots shall take place on 6th February, 2026.

34.3. Each side shall get a maximum time of 30 minutes to present their arguments of which no Speaker shall be permitted to address the Court for more than 18 minutes. The time limit is inclusive of the time for Rebuttal or Sur-rebuttal respectively. The maximum

time for Rebuttal is 2 minutes and the maximum time for Sur-rebuttal is 1 minute. Each speaker is required to speak for a minimum of 12 minutes exclusive of time taken for Rebuttals and Sur-rebuttals.

34.4. *Scoring:*

34.4.1. For the Preliminary Rounds, the winner of each such round shall be determined on the basis of the criteria of evaluation of the memorials scores and the speaker scores from which the top 8 teams will proceed to the Quarter Final Rounds.

35. Quarter Final Rounds:

35.1. The eight teams that proceed to the Quarter Final Rounds, as determined by the Rules above, shall each argue only ONCE for the side allotted by a draw of lots. The fixtures for the Quarter Final Rounds shall be based on the system of power matchup as follows:

Rank 1 v. Rank 8 (QF 1)

Rank 2 v. Rank 7 (QF 2)

Rank 3 v. Rank 6 (QF 3)

Rank 4 v. Rank 5 (QF 4)

35.2. Four teams shall qualify for the Semi Final Rounds on a knock out basis, i.e., the winner of each Quarter Final Round shall qualify to the Semi Final Rounds.

35.3. *Scoring:*

35.3.1. The top four teams shall be determined only on the basis of cumulative speaker scores.

36. Semi Final Rounds:

36.1. The four teams that proceed to the Semi Final Rounds, as determined by the Rules above, shall each argue only ONCE for the side allotted by a draw of lots. The fixtures for the Semi Final Rounds shall be as follows:

Winner of Quarter Final Round I v. Winner of Quarter Final Round IV

Winner of Quarter Final Round II v. Winner of Quarter Final Round III

36.2. Two teams shall qualify for the Final Round on a knock out basis, i.e., the winner of each Semi Final Rounds shall qualify to the Final Round. The bench-strength for this round shall be an odd number but not one.

36.3. For the Semi Final Rounds, each team may distribute its allocated forty-five (45) minutes as it deems fit, provided that no oralist is allocated less than fifteen (15) minutes or more than twenty-five (25) minutes for presentation of main arguments. No more than five (5) minutes are reserved for its rebuttal/sur-rebuttal.

36.4. *Scoring:*

36.4.1. The top two teams shall be determined only on the basis of cumulative speaker scores.

37. Final Rounds:

37.1. The two (2) teams that proceed to the Final Round, as determined by the Rules above, shall each argue only ONCE for the side allotted by a draw of lots. The bench strength for the Final Round shall be an odd number but not one.

37.2. The team which wins the Final Round shall be declared as the 'Winning Team'. The other team shall be declared as the 'Runners-Up Team'.

37.3. For the Semi Final Rounds, each team may distribute its allocated forty-five (45) minutes as it deems fit, provided that no oralist is allocated less than fifteen (15) minutes or more than twenty-five (25) minutes for presentation of main arguments. No more than five (5) minutes are reserved for its rebuttal/sur-rebuttal.

37.4. *Scoring;*

37.4.1. The winner of the Final Round shall be determined on the basis of the score of the oral rounds only.

X. MISCELLANEOUS

38. Scouting is strictly prohibited. Scouting by any of the team members shall result in disqualification.

39. If a team scheduled to take part in a Round does not appear within 10 minutes of the scheduled time, the other team present shall be allowed to submit ex-parte.

40. Participants are expected to behave in a dignified manner and not to cause any inconvenience to the Administrators, the Judges of the Competition or any of the other participants.

41. The Administrator reserves the right to take appropriate action for any unethical, unprofessional or immoral conduct.

42. Facilities such as photocopying, library usage, internet connectivity, etc. may be provided subject to the convenience of the Administrators and will be informed to the teams closer to the commencement of the Competition. Notwithstanding, participants are requested to make their own arrangements for the same.

43. The Administrator shall not be responsible for any loss of belongings of the team during the Competition.

44. All interpretations, as well as any waivers, consents or other decisions in the administration of the Competition are at the complete discretion of the Administrators. Any decision made by the Administrators shall be final and binding on all participating teams.

45. The address for the correspondence for all the formalities shall be:

Dr. Jaswinder Kaur,

Faculty Coordinator, RGNUL Moot Court Committee

Rajiv Gandhi National University of Law, Punjab,

Sidhuwal Campus, Bhadson Road, Patiala – 147001

46. Any and all queries regarding the Moot Proposition and Rules & Regulations shall be sought only via e-mail to mootcommittee@rgnul.ac.in.