

REGISTRATION FORM

This is to register the following participants to:

| | |
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| Seminar Title: | Assertiveness & Strategic Speaking Skills |
| Seminar Date: | November 12, 2019, 1:30 P.M. - 5:30 P.M. |
| Seminar Venue: | Astoria Plaza, J. Escriva Drive, Ortigas Center, Pasig City |



Company Information

| | | | |
|-------------------|--|------------|--|
| Company Name | | Tel. No. | |
| Company Address | | | |
| Industry | | Tin # | |
| Reserving Officer | | Position | |
| Email Address | | Mobile No. | |

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|--------------------|--|----------------|--|------------|--|
| Participant 1 Name | | Nickname | | Mobile No. | |
| Position | | Email Address | | | |
| Birthday | | Personal Email | | | |

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|--------------------|--|----------------|--|------------|--|
| Participant 2 Name | | Nickname | | Mobile No. | |
| Position | | Email Address | | | |
| Birthday | | Personal Email | | | |

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|--------------------|--|----------------|--|------------|--|
| Participant 3 Name | | Nickname | | Mobile No. | |
| Position | | Email Address | | | |
| Birthday | | Personal Email | | | |

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|--------------------|--|----------------|--|------------|--|
| Participant 4 Name | | Nickname | | Mobile No. | |
| Position | | Email Address | | | |
| Birthday | | Personal Email | | | |

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|--------------------|--|----------------|--|------------|--|
| Participant 5 Name | | Nickname | | Mobile No. | |
| Position | | Email Address | | | |
| Birthday | | Personal Email | | | |

A. Course Investment:

- Early Bird Rate** - P3,920.00 VAT inclusive when registered and paid on or before October 14, 2019.
Regular Rate - P4,480.00 VAT inclusive when registered and paid from October 15 - November 11, 2019.
Onsite Rate - P5,040.00 VAT inclusive when registered and paid on November 12, 2019.

Participant's fee is inclusive of P.M. snacks, free-flowing coffee and tea, participant's workbook/handouts, and the certificate of completion.

Note:

1. Reservation is open but confirmation of seat is based on the payment of participant.
2. Payment with tax withheld will only be accepted provided FORM 2307 or Certificate of Tax Withheld is attached.

B. This registration form, when completed, may also serve as your billing notice.

- Total Program Investment:
- Pls. pick up check on:

C. Or you may deposit payment to:

South East Asia Speakers and Trainers Bureau, Inc. RCBC Head Office, SA# 300011920-1 TIN 225-880-116-000
 (Pls. email to us a scanned copy of the deposit slip, complete with company name, contact person, and telephone number).

D. Cancellation Policy: Cancellation made after submission of registration form and No-Shows will be charged 50% of the entire program cost. Substitution of participants will be accepted at any point before the seminar. South East Asia Speakers and Trainers Bureau, Inc. reserves the right to cancel the scheduled program run if the minimum number of participants is not met.