

## Registration Form Live Online Training

### PROGRAM FEE

Full Payment Php 4,800

Note: All program fees are net of all applicable taxes.

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Surname

First Name/s

MI

Nickname: \_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Personal Email: \_\_\_\_\_

### EMPLOYMENT INFORMATION

Company Name: \_\_\_\_\_

Position: \_\_\_\_\_

Company Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Company Email: \_\_\_\_\_ Office Number: \_\_\_\_\_

### ACADEMIC QUALIFICATION

University: \_\_\_\_\_

Course: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

### HOW DID YOU LEARN ABOUT THIS PROGRAM?

EMAIL  DIRECT MAIL  WEBSITE  OTHERS, please specify \_\_\_\_\_

### REQUIRED DOCUMENTS

Please provide soft copy for the following:

1. Resume (*Word or PDF* format)

### TERMS AND CONDITIONS:

#### Payment:

1. Seat will be reserved upon payment of the prescribed fees stated in this Registration Form.

#### Refunds, Cancellation and Substitution Policies

1. Refunds will be honored if we received a written notice of cancellation 30 days prior to the start of the program and must be faxed to 8706-2212 or 8706-4645. Cancellations received less than 30 days prior to the start of the program will be charged 25% of the total program fee while those received one week prior to the start will be charged 50%.
2. No refund will be made for cancellations received after the stated deadline.
3. IFPM reserves the right to cancel, change venues, and facilitators due to factors beyond our control, and to ensure learning effectiveness. In case of cancellation, seat can be moved to the next batch, or full refunds will be given.
4. Substitutions for individuals can be made any time prior to event date.

### DATA PRIVACY:

Upon signing this form you are agreeing that the personal data obtained from the registration form entered and stored within the Institute's authorized information and communications system and will only be accessed by the IFPM authorized personnel. Furthermore, the information collected and stored in this form shall only be used for the following purposes:

- Announcements / promotions of events, programs, courses and other activities offered / organized by the Institute and its partners;
- Activities pertaining to establishing relations with participants/members/alumni;
- IFPM has the right to share your information to our related affiliate companies, institutions, and or subsidiaries;
- IFPM shall not disclose the participants/members/alumni personal information

### CONFIRMATION

I hereby certify that I have read and accepted all the terms and conditions stated in this registration form.

\_\_\_\_\_

SIGNATURE

\_\_\_\_\_

DATE