# **TRAINING-WORKSHOP REGISTRATION FORM**

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|  | | | | | | **Date:** | |
| This form enables you to:   * register to attend the APCoRE Research Capability Building Program; | | | | **Important notes**   * All prices quoted are in Philippine Peso (PhP) * By completing this registration form you have read, understood and agree to the cancellation policies and the privacy statement as stated on this form * Please keep a photocopy for your records. One form per person. | | | |
| **ASIA-PACIFIC CONSORTIUM OF RESEARCHERS AND EDUCATORS**  Name of Bank: Banco de Oro  Address: Old Sta. Mesa – Albina Branch  Account Name: Asia-Pacific Consortium of Researchers and  Educators, Inc.  Account Number: Peso Savings Account No. 007090106605  Dollar Account No. 107090098491  SWIFT Code: BNORPHMM  Phone: +61 3 917 5477458 (02) 33517 77/ 335 1787loc.176  Email: apcoreincorporated@gmail.com | | | |
| Contact details | | | | | | | |
| Inst.  Asst. Prof.  Assoc. Prof.  Dr.  Prof. | | | | | Other (please specify) |  | |
| Last name |  | | First name | |  | | |
| Affiliation |  | | | | | | |
| Position |  | | | | | | |
| Address |  | | | | | | |
| Work phone | (      ) | Work fax | | (      ) | | Mobile |  |
| Email |  | | | | | | |

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| Please indicate your area of work/type of organisation (select one option only) | | | |
| National Government Agency | Research Organisations | | Local government agency |
| Community services and non‑government service provider | | Other please specify: | |

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| Participants dietary requirements | | | | | |
| For catering purposes at the conference and the Welcome Reception, please indicate if you have any special dietary requirements. | | | | | |
| Vegetarian | Vegan | Gluten free | | | Halal |
| Allergy to nuts | Lactose Intolerant | Other, please specify: | | | |
| TRAINING REGISTRATION | | | | | |
| The registration fee is **per person** and includes: Training Kit, Certificates | | | | | |
| **Registration type** | | | **APCoRE Member** | **Non-APCoRE Member** | |
| Full registration | | | **PhP5,500.00** | **PhP6,500.00** | |

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| Pledge of Commitment |
| **I hereby pledge/commit to attend and complete the training-workshop**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature over Printed Name and Date** |