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REGISTRATION FORM

INTERNATIONAL PRACTICE & GUIDELINES FOR HYGIENE, CLEANING & DISINFECTION STANDARDS IN HEALTHCARE SETTINGS

7 - 9 October 2019 | VENUE: Centuria Medical Makati, Makati City, Philippines

Name of Delegate:					
Company Name:			☐ Private ☐ Government		
Position:					
Address:					
Tel. No.: Fax No.:					
Mobile: Email:					
For Additional Delegate/s (please use extra sheet if necessary)					
Name	Title			Email	
1.					
2.					
3.					
Contact Person:		Signature:			
How to Register		Payment Instructions			
1. Send this Registration Form through email:	0	Health Core International Consultancy Inc.			
info@health-core.org or FB Messenger: Health Core Attach copy of Deposit Slip as proof of payment.		Union Bank - P. Tuazon, Cubao Branch Peso Current Account No. 00204-000682-0			
 Attach copy of Deposit Slip as proof of payment. A confirmation email will be sent by Secretariat that 		US Dollar Account No. 132040002002			
will serve as your Pass / ID to the workshop.		OS Bollar	, tood arre r	1929 10002002	
, .		Thru MLhuillier or LBC:			
		Jocelyn Alumno – HealthCORE			
		Centuria Medical Makati, Makati City			
		CP: 0908.8887990			

REGISTRATION FEE: \$600 (Inclusive of Training Fee, Meals, Materials and Certificate)

** 10% EARLY REGISTRATION DISCOUNT UNTIL 26 AUGUST 2019 **

** 10% Discount for Government Hospitals **