



24th PSH-PLAS JOINT ANNUAL CONVENTION

February 20-22, 2019

Theme:

"Hypertension and Lipids in the Globally Changing World"

Edsa Shangri-La Hotel, Mandaluyong City



REGISTRATION FORM

(PLEASE CHECK) ✓

- PSH Member
 PLAS Member
 Non Member
 Government Physician
 Allied Health Professional
 Accompanying Person
 Intern / Resident / Fellow in Training

NAME			
Please print	Last name	First Name	M.I.

ADDRESS	

Affiliate Institution:	
Specialty:	

Telephone (Home): (Office):

Cell phone No.: Fax:

E-mail address:

PRC License Number: Sex: Male Female

CATEGORY	Before December 14, 2018	ONSITE
Member	₱ 2,500.00	₱ 3,000.00
Non-Member	₱ 3,000.00	₱ 3,500.00
Government Doctor	₱ 2,500.00	₱ 3,000.00
Allied Health Professional <small>(Nurse / Midwife / Physical Therapist / Nutritionist / Dietitian)</small>	₱ 2,000.00	₱ 2,500.00
Accompanying Person	₱ 1,500.00	₱ 2,000.00
Resident/Intern/Fellow-in- Training <small>(Must present certificate of training)</small>	_____	_____

MODE OF PAYMENT

Cash : _____

Receipt No. : _____

Check (Bank, check #): _____

Received by : _____

a.) Please make check payable to:
PHILIPPINE SOCIETY OF HYPERTENSION, INC.

b.) Remittance through T/T to correspondence Bank
Bank of the Philippine Islands (BPI)
Account No. 3301-0178-97
Shaw Boulevard Branch Mandaluyong City
Email your deposit slip together with this registration form at phihpn@yahoo.com

PSH-PLAS SECRETARIAT
Unit H- 11th Floor, STRATA 100 Bldg, Ortigas Complex, 1605 Pasig City
Telephone Nos. 696-2819
Email Address: phihpn@yahoo.com

THIS FORM MAY BE REPRODUCED