



CENTER FOR LABOR EDUCATION, ADVOCACY, RESEARCH AND DEVELOPMENT, INC.(CLEARED, Inc.)

# RESERVATION FORM

TIN NO. 004-834-830-000 NON VAT

G/F PRRM Bldg. 56 Mo. Ignacia Ave. corner Dr. Lazcano St., Bgy. Paligsahan, Quezon City 1103  
Telefax No. 709 8489; Trunkline: 373-0721, cleared 21@yahoo.com.ph, cleared23@yahoo.com, www.cleared.webs.com;

**Seminar Workshop**  
on

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**SEMINAR TITLE**

\_\_\_\_\_

**DATE:**

**Venue: PRRM BUILDING**

G/F PRRM Bldg. 56 Mo. Ignacia Ave. corner Dr. Lazcano St., Bgy. Paligsahan, Quezon City 1103

\_\_\_\_\_

**(NICKNAME)**

\_\_\_\_\_

**(LAST NAME)**

**(FIRST NAME)**

**(MIDDLE INITIAL)**

**POSITION:** \_\_\_\_\_

**COMPANY/ORGANIZATION:** \_\_\_\_\_

**OFFICE ADDRESS:** \_\_\_\_\_

**TELEPHONE NO./S** \_\_\_\_\_

**MOBILE NO./S** \_\_\_\_\_

**FAX NO.** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

\_\_\_\_\_

**PAYMENT DETAILS:**

**O.R. NO.:** \_\_\_\_\_

**FOR CHECK PAYMENT**

**AMOUNT: P** \_\_\_\_\_

**CHECK #:** \_\_\_\_\_

**BANK:** \_\_\_\_\_

**FOR CASH PAYMENT: P** \_\_\_\_\_

**NOTE:**

Payment for the seminar fee shall be made before or upon registration/first day of the seminar program.  
Thank you.

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