



Republic of the Philippines

Province of Cavite

Trece Martires City

CAVITE COUNCIL OF HUMAN RESOURCE MANAGEMENT PRACTITIONERS, INC.

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# STRESS MANAGEMENT SEMINAR

- Date:* May 16 - 17, 2019
- Time:* 8:00 AM – 5:00 PM
- Location:* The Junction Hotel, Mahogany Avenue,  
Tagaytay City, Cavite
- Registration Fee:* P5,200.00 (live-in)  
P4,000.00 (live-out)
- Inclusion:* Training Kit  
Meals (am snacks to pm snacks)  
Live-In (room accommodation with dinner  
and breakfast)
- Facilitators:* from Cavite Center for Mental Health
- Mode of Payment:* Cash or Cheque payable to Cavite Council of  
Human Resource Management Practitioners  
(CCHRMP), Inc.  
TIN No. 009-134-256  
Land Bank of the Philippines Acct. No. 2052102874
- RSVP to:* Fax the registration form at (046) 419-1273 or  
email at [cchrmp\\_cavite@yahoo.com.ph](mailto:cchrmp_cavite@yahoo.com.ph)
- RSVP Deadline:* May 13, 2019

\*Limited for 80 slots only.



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**REGISTRATION FORM**

<b>PARTICIPANTS:</b>					
FIRST NAME	M.I.	LAST NAME	POSITION	GENDER	LIVE 1 (Please Check)

**NAME OF AGENCY:** \_\_\_\_\_

**AGENCY ADDRESS:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**CONTACT NUMBER:** \_\_\_\_\_

**TITLE OF TRAINING:**  
**STRESS MANAGEMENT SEMINAR**

My / Our training fee of \_\_\_\_\_ :

was deposited (interbranch) to  
Cavite Council of Human Resource Management Practitioners (CCHRMP), Inc. at  
Land Bank of the Philippines Cheque Acct. No. 2052102874  
*Attached is a photocopy of the inter-branch deposit slip.*

is attached  Cash  Cheque: Drawee Bank and Branch \_\_\_\_\_

will be paid upon registration  
 Cash  Cheque: Drawee Bank and Branch \_\_\_\_\_

<b>Signature:</b> _____	<b>Date:</b> _____
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*To be filled up by CCHRMP Officers:*

<b>OR No:</b> _____	<b>Amount:</b> _____	<b>Date:</b> _____	<b>Control No.:</b> _____
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