**ACTUARIAL SOCIETY OF THE PHILIPPINES**

**IFRS 17 SEMINAR REGISTRATION FORM**

1. Participant information:

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| --- | --- | --- | --- | --- |
| Surname | Given Name | MI | Contact No(s) | E-mail Address |
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2. Company information:

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| --- | --- |
| Name of Company: |  |
| Address: |  |

* To avail of the early bird fee, please submit this registration form and payment on or before ***October 10, 2018***. **Forms may be faxed to the ASP Secretariat at 814-0824 or emailed to** [**actuarial@pldtdsl.net**](mailto:actuarial@pldtdsl.net) **and** [**burn0479@gmail.com**](mailto:burn0479@gmail.com) **to reserve slots.**