



MAPUA UNIVERSITY
Confirmation Slip Form

Document No. : FM-CE-16-06

Effective Date: May 21, 2019

Company: _____ Nature of Business: _____
Address: _____
Tel: _____ Email Address: _____ TIN No. _____

CONFIRMATION SLIP FORM

Course: _____

Date of Training: _____ Venue: _____

✓ YES! Please register the following participant/s to your seminars:

Name: _____
Address: _____
Position: _____
Mobile No.: _____
Email: _____

Name: _____
Address: _____
Position: _____
Mobile No.: _____
Email: _____

Name: _____
Address: _____
Position: _____
Mobile No.: _____
Email: _____

Name: _____
Address: _____
Position: _____
Mobile No.: _____
Email: _____

Terms and Conditions:

1. Registration shall be made at least a week before the training/seminar date. Full payment is required during registration. Official receipts shall be issued only by the Cashier of Mapua University.
2. Reservation for the seminar shall be done by phone, on-line, or in person.
3. Cancellation shall be made at least three (3) working days before the start of the training, otherwise, payment shall not be refunded.
4. CCESC reserves the right to cancel or re-schedule the training/seminar.

- Please make checks payable to: **MAPUA UNIVERSITY** or **MALAYAN EDUCATION SYSTEM, INC.**
- Bank : RCBC (Rizal Commercial Banking Corporation)
- Payment Form : RCBC Bills Payment Form
- Biller/ Company Name : Mapua University
- Reference No. : 2018020020
- Subscriber/ Policy Holder : Payer's Name or Company Name

NOTICE and CONSENT

“All information shall be used by the University for legitimate purposes specifically for registration and shall be processed by authorized personnel in accordance with the Data Privacy Policies of the University”.

“I hereby allow/authorize CCESC to use, collect and process the information for legitimate purposes specifically for registration, and allow authorized personnel to process the information”.

Signature over Printed Name