



INTEGRATED BAR OF THE PHILIPPINES SOUTHERN LUZON REGIONAL CONVENTION

Bellevue Hotel

Alabang, Muntinlupa City, Metro Manila

July 24 to 26, 2014

REGISTRATION FORM

NAME: _____

CHAPTER: _____

ROLL OF ATTORNEY NO.: _____

OFFICE ADDRESS: _____

OFFICE TELEPHONE NO.: _____

OFFICE FAX NO.: _____

MOBILE NUMBER: _____

E-MAIL ADDRESS: _____

AMOUNT PAID: _____ DATE: _____

REGISTRATION FEES

P 3,000.00 - from May 15, 2014 to
June 30, 2014; and

P 3,500.00 - from July 1, 2014 up
to Convention Date

Note: Cash/Check must be payable to IBP Cavite or deposited
to the IBP Cavite Regional Convention account:

Account Name: IBP CAVITE-SLR

Checking Account No.: 1281-0055-33

Bank Name and Branch: BPI Nueno, Imus City, Cavite

COPY OF DEPOSIT SLIP AND REGISTRATION FORM MAY BE SENT TO ATTY.
RACQUEL CRISOLOGO-LARA/MS. KRISTINE B. CIPRIANO FOR CONFIRMATION AND
ISSUANCE OF OFFICIAL RECEIPT AT TEL. NO. (046) 970-3062 OR TRU EMAIL -
ibpcavite@yahoo.com.ph.