



BECAUSE YOUR  
HEART  
MATTERS

**48<sup>th</sup> PHA ANNUAL CONVENTION AND SCIENTIFIC MEETING**  
Linkages & Collaborations: Convergence towards Comprehensive Cardiovascular Care  
May 24-27, 2017, Edsa Shangri-la Hotel, Mandaluyong City

**REGISTRATION FORM**

|                    |            |                        |
|--------------------|------------|------------------------|
| PRC No.            | PMA No.    | BIRTHDATE (MM DD YYYY) |
| FAMILY NAME        | GIVEN NAME | MIDDLE NAME            |
| INSTITUTION/CLINIC |            |                        |
| ADDRESS            |            | ZIP CODE               |
| TELEPHONE NO.      | MOBILE NO. | EMAIL ADDRESS          |

**REGISTRATION FEES**

*Please Check:*

**ADVANCE REGULAR DAILY**

(Until Mar 31, 17) (After Mar 31, 17)

|                          |                    |    |       |       |          |
|--------------------------|--------------------|----|-------|-------|----------|
| <input type="checkbox"/> | PHA Member         | P  | 2,300 | 2,600 | 1,000 ** |
| <input type="checkbox"/> | Non Member         |    | 2,500 | 2,800 | 1,000 ** |
| <input type="checkbox"/> | Resident           |    | 1,000 | 1,200 | 800 **   |
| <input type="checkbox"/> | Fellow-in-training |    | 1,000 | 1,200 | 800 **   |
| <input type="checkbox"/> | Medical Student    |    | 1,000 | 1,200 | 800 **   |
| <input type="checkbox"/> | Nurse              |    | 1,000 | 1,200 | 800 **   |
| <input type="checkbox"/> | Technician         |    | 1,000 | 1,200 | 800 **   |
| <input type="checkbox"/> | PHA Family Member  |    | 600   | 700   |          |
| <input type="checkbox"/> | Exhibitor          |    | 800   | 1,000 |          |
| <input type="checkbox"/> | Foreign Delegate   | \$ | 350   | 500   |          |

**MEMBERSHIP FEE / ANNUAL DUE**

|                          |                  |     |
|--------------------------|------------------|-----|
| <input type="checkbox"/> | FELLOW           | 500 |
| <input type="checkbox"/> | DIPLOMATE        | 500 |
| <input type="checkbox"/> | ASSOCIATE FELLOW | 400 |
| <input type="checkbox"/> | ASSOCIATE        | 300 |

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*Signature of Registrant*

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*Date*

- \* Annual membership fee is not included in registration fee  
\*\* Daily registration fee does not include convention kit

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Website: www.philheart.org

**Notice:**

1. All transactions received after March 31, 2017 shall be considered as On-Site registration.
2. You may pay through the Secretariat or deposit with any branch of the Bank of Philippine Islands (BPI) to the account of the Philippine Heart Association or PHA with Current Account No. 4011-0222-14  
Send a copy of the deposit slip to the PHA Secretariat through fax or email for posting.
3. Bring your original receipt for verification purposes during the annual convention.