

REGISTRATION FORM

(email to secretariat@hrap.org.ph)

HRAP GENERAL MEMBERSHIP MEETING MAY 16, 2024 (9:30AM TO 3:00PM)

| | YES, I will attend the General Membership Meeting on May 16, 2024 |
|---------------------------------|---|
| | Name & Designation of Member: |
| | Please register also my accompanying person/s. |
| | 1) Name & Designation |
| | 2) Name & Designation |
| | I will not be able to attend the GMM but I am sending my Representative/s. His/Her name is: |
| | 1)Name & Designation |
| | 2) Name & Designation |
| | SORRY, I will not be able to attend the GMM. |
| Approved by: | |
| Name of HRAP Member & Signature | |
| Establishment | |
| Date | |