



FRONTIERS & INNOVATIONS
IN TEACHING

REGISTRATION FORM

Participant Information

Name of School/Company:		
School/Company Address:		
Website:	Telephone Number:	Fax Number:
Name of Participants:	Mobile Number and Email Address:	Will bring a computing device, e.g., iPad, laptop, etc. to the conference? (Y/N, please indicate if iPad, Mac, PC or smartphone device)
1.		
2.		
3.		
4.		
5.		

Payment Details

Total Amount:	<input type="checkbox"/> Cash	<input type="checkbox"/> Check Bank & Check # _____
Date of Payment: _____ (based on date of actual deposit or payment to XS)		
<input type="checkbox"/> Early Bird (+ JBEC, EDSOR, Public School) <input type="checkbox"/> Regular <input type="checkbox"/> Walk-In <input type="checkbox"/> Foreign Participant <input type="checkbox"/> Early Bird <input type="checkbox"/> Regular		
Mode of Payment: *Please fax this Registration Form and Deposit Slip to 7214173; Attention: TESS ELIZALDE	<input type="checkbox"/> Direct to Xavier School (submit this form together with payment to the Cashier) <input type="checkbox"/> *Deposit to Banco de Oro (Xavier School, Inc. Acct. No. 002890125005) <input type="checkbox"/> *Deposit to UnionBank (Xavier School, Inc. Acct. No. 107030003061)	
Contact Person re: Registration and Payment Details: (For groups)		Contact Information (email and mobile no)

Confirmation Slip: to be faxed to participating school

Attention:

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This is to confirm your registration of _____ participants to the FIT: Pupil Power! Conference at Xavier School on April 17-18, 2015. You may register for your breakout sessions starting March 15, 2015 at xsfitt2015.weebly.com. See you soon!

Thank you,

Ms. Tess Elizalde, FIT Registration Committee Head

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