

**Philippine Obstetrical and Gynecological Society**  
**2011 Mid Year Convention**  
*Atrium Limketkai Center, Cagayan de Oro City, 26-28 April 2011*

**REGISTRATION FORM**

Please fill up completely and submit to registration committee through:

FAX → (088) 857 4717  
Email → [moval0607@gmail.com](mailto:moval0607@gmail.com)

NAME \_\_\_\_\_  
(Please print as it should appear on your Certificate of Attendance)

MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

HOSPITAL AFFILIATION \_\_\_\_\_

CATEGORY:       Fellow                       Diplomate                       Associate  
                     Junior Member               Non-member                   Resident  
                     Foreign Delegate           Accompanying               Others

LANDLINE NUMBER \_\_\_\_\_

MOBILE NUMBER \_\_\_\_\_

**PAYMENT DETAILS**

DEPOSIT TRANSACTION NUMBER \_\_\_\_\_

BANK \_\_\_\_\_

AMOUNT \_\_\_\_\_

---

**\* Please FAX / EMAIL (scanned) copy of Deposit Slip with this registration form**