



Positive Action Foundation Phils, Inc. (PAFPI)

2613 Dian Street. Malate, Manila
T/F: (02) 567-3506 or (02) 359-9594
Email: pafpiorg@gmail.com

REGISTRATION FORM



**Count me in! Yes! I would like to participate in
“HIV COUNSELING TO TESTING TRAINING (HCTT)”**

*Positive Action Foundation Philippines., Inc.
Location: 2613 DianSt. Malate, Manila.*

Name of Participant/s:	Last Name	First Name	M. I.	Nickname
Title:	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Ms. <input type="checkbox"/> Dr.	<input type="checkbox"/> Atty. <input type="checkbox"/> Prof. <input type="checkbox"/> _____	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Designation:				Religion
Name of Organization:				
Mailing Address:				
Website:				
Phone No: (Pls. include area code)		Fax No: (Pls. include area code)		
Mobile No:		Email:		
Signature:				
Briefly describe the programs of your organization:				

Reminders:

- **Email or Fax the form to us using the information above.**
- Please indicate your **title, complete name and designation** for the issuance of certificate.
- Please refrain from bringing your car as there is no parking in the area.