



15th MT. UGO SUMMER CLIMB

Tinongdan, Itogon, Benguet

March 31-April 1-2, 2017

REGISTRATION FORM: (Please accomplish this form legibly and completely)

**Porter Fee (Php500.00) is not included in the Registration Fee

RESPONSIBILITY CLAUSE/WAIVER

I am joining the **15th Mt. Ugo Summer Climb in Tinongdan, Itogon, Benguet** scheduled from **March 31-April 1-2, 2017** on my free will and accord and I solely and exclusively assume all risk and dangers which I may be exposed to for the duration of the activity and I therefore discharge, waive and absolutely extinguish the organizers and all its cooperating agencies/entities from any responsibility.

LAST																				
FIRST																				
MIDDLE NAME																				

Gender <input type="checkbox"/> M <input type="checkbox"/> F	Age <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>	Civil Status <input type="checkbox"/> Single <input type="checkbox"/> Married	Birthdate (mm/dd/yy) <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
---	--	--	---

ADDRESS																					
CP/Tel.No.	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	Email Address	
OCCUPATION																					
Business Address																					
Name & Address of GROUP/ORGANIZATION, If ANY																					
WHOM TO NOTIFY IN CASE OF EMERGENCY																					
Name	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	Relationship	
Address	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	CP/Tel. No.
	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>	<input style="width: 20px;" type="text"/>
Do you need a Porter?	<input type="checkbox"/> YES	<input type="checkbox"/> NO																			
	If YES, how many?																				

Likewise, I hereby grant permission to the cooperating organizers to use my name, likeness and identity in any photographs, motion pictures, television programs, or any other record of the event in perpetuity throughout the world, in any media now known or hereafter developed.

Registrant's Signature

WITNESSES:

Signature

Signature

Registration Centers:

Provincial Tourism Affairs Office – 074-422-1116 (Ms. Claire Prudencio)
SB Committee on Tourism- 09102508492 (Councilor Norberto I. Pacio)Event Coordinator
Itogon Mayor's Office – 09993367522 (Nestor Camado Jr.)MTAO
Tinongdan Brgy. Hall – 09485382799 (PB Ruben G. Cunanan)

Secretariat: Ms. Evelyn Balbines @ 09282890886, Ms. Jerda D. Sanil @ 09398345655