



REGISTRATION FORM

63rd PSME NATIONAL CONVENTION

SMX CONVENTION CENTER

OCTOBER 21-24, 2015

Last Name First Name M.I. Nickname

Mobile Number/s Telephone No./s Fax No./s Email Address/s

Company Name

Mailing Address

Industry (Please check applicable) JOB TITLE/ FUNCTION _____

<input type="checkbox"/> Academe	<input type="checkbox"/> Inventor	<input type="checkbox"/> HVAC/ R Engineering	<input type="checkbox"/> Management
<input type="checkbox"/> Automation	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Contracting	<input type="checkbox"/> Quality Control
<input type="checkbox"/> Consultancy / Design	<input type="checkbox"/> Plant Operations	<input type="checkbox"/> Entrepreneur	<input type="checkbox"/> R&D
<input type="checkbox"/> Facilities / Utilities	<input type="checkbox"/> Sales & Marketing	<input type="checkbox"/> Government Service	<input type="checkbox"/> Transportation
<input type="checkbox"/> Others: _____			

PSME Member?

☐ Yes ☐ No

Chapter _____

PRC License ☐ CPM# _____ ☐ RME# _____

Life Member?

☐ Yes ☐ No

Life Member # _____

☐ PME# _____ Expiration Date: _____

Mode Payment:

☐ CASH: Amount _____

☐ Check Enclosed (local Check only): Check No. : _____ Amount: _____

Check payments payable only to:

PHILIPPINE SOCIETY OF MECHANICAL ENGRS NATIONAL OFFICE INC.

BDO-ESPANA BRANCH , ACCOUNT#0000-5025-3085

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PSME National Headquarters

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