



The Chalet @ Bacolod City

November 25 to 26, 2010

# NATIONAL ICT SUMMIT 2010

*Connecting the Islands to the World!*

## APPLICATION CONTRACT FOR PARTICIPATION AS DELEGATE

Full Name:

Company/LGU Name:

Official Designation:

Head of Company/LGU (if another person):

Name of ICT Council (if any):

Business Address:

Telephone:

Fax:

E-Mail:

URL:

Mobile Phone No.

Sector	Talent Development	Business Environment	Government	Others, please specify:
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### CATEGORY

- Animation
- Business Process Outsourcing
- Contact Centers
- Consumer Electronics (Technology and Hardware vendors, Allied Services)
- Software Development
- Engineering Design Services
- Trade Services (Consultancy, Financial Institution, IT Solutions)
- Health Information Management

- IT Parks, Real Estate
- Green IT
- Human Resource Training
- Universities, Academic Institutions
- Local Government
- Tourism-Related Services
- Telco's, IT Security
- Others, Please Specify:

SPECIFIC PRODUCTS/SERVICES OFFERED: \_\_\_\_\_  
(if any) \_\_\_\_\_

### Classifications:

PARTICIPATION FEES (P6,000.00) Less Discounts:	Please Check	Total Amount To Be Paid:
25% NICP ICT Council Member	<input type="checkbox"/>	Php _____ **
25% Non-NICP ICT Council Member But Paid on or before October 30, 2010	<input type="checkbox"/>	
50% Early Bird Bonus* (plus 25% only for NICP Members availing of standard 25% off)	<input type="checkbox"/>	
100% (6 <sup>th</sup> delegate after group of 5-must belong to same ICT Council/Office)	<input type="checkbox"/>	
100% (official exhibitor-delegate)	<input type="checkbox"/>	
100% (official sponsor-delegate)	<input type="checkbox"/>	
100% (invited resource speaker-delegate)	<input type="checkbox"/>	

\*Early Bird only applies for REGISTRATION AND PAYMENT MADE ON OR BEFORE SEPTEMBER 30, 2010. (For payment instructions, email [nicp2010@gmail.com](mailto:nicp2010@gmail.com))

\*\*NICP reserves the right to deny or refuse the discounts declared for valid reasons and charge the proper conference fee.

Authorized Signatory (Printed Name)

Designation

Signature

Date

-----For NICP Use -----

Approved By:

Authorized Signatory (Printed Name)

Designation

Signature

Date

(For payment instructions and details of sponsorship package, please email [nicp2010@gmail.com](mailto:nicp2010@gmail.com))