



RESERVATION FORM

Date: _____

Please register me/us to the training course on:

Title of Training Course	Date of Training	Training Fee	No. of Participant/s

Please make checks payable to the Food Development Center, National Food Authority

Name & Position of Participant/s	Fee (P)
TOTAL	
COMPANY	
ADDRESS	
PHONE	
PRODUCT LINE	
FAX	
E-MAIL	

4 EASY WAYS TO SEND THE RESERVATION FORM

MAIL TO: FOOD DEVELOPMENT CENTER
 FTI Complex, Taguig City

FAX TO: Nos. 838-4016 to 17 or 838-4692

SEND THRU E-MAIL ADDRESS: infofdc@pacific.net.ph

CALL AT: 838-4478; 838-4014 to 16; 838-4601
 Ask for Ms. Luzviminda C. Maala or Ms. Amelia S. Bautista