Filipina Women's Network

THIRD ANNUAL FWN SUMMIT

FILIPINA FIRST: RE-INVENTING OURSELVES

OCTOBER 21-23, 2005
CROWNE PLAZA
UNION SQUARE
SAN FRANCISCO

# THIRD ANNUAL FWN SUMMIT
# FILIPINA FIRST: RE-INVENTING OURSELVES
## SUMMIT REGISTRATION FORM

Organization _____

Address _____

City / State / Zip _____

Phone _____ Fax _____

Email _____ URL _____

## AGREEMENT

☐ **YES! Here's my registration.** I will be there to help convene the FILIPINA Summit!

| | Thru 9/16 | Thru 0/11 | Thru Onsite | TOTAL |
|---|---|---|---|---|
| **First registrant from an organization** | | | | |
| _____FWN member & students (attach/fax student ID to 415.840.0655) | ____$200 | ____$250 | ____$300 | _____ |
| _____Nonmember | ____$250 | ____$300 | ____$350 | _____ |
| **2nd-10th registrants from same organization** (register together; attach individual registration forms) | | | | |
| _____FWN member | ____$180 | ____$230 | ____$280 | _____ |
| _____Nonmember | ____$230 | ____$280 | ____$330 | _____ |
| **11th + registrants from same organization** (register together; attach individual registration forms) | | | | |
| _____FWN member | ____$160 | ____$210 | ____$260 | _____ |
| _____Nonmember | ____$210 | ____$260 | ____$310 | _____ |
| **Additional events for purchase:** | | | | |
| **Business Dining Etiquette Lunch (10/21)** | | | | |
| _____FWN member | ____$40 | ____$50 | ____$60 | _____ |
| _____Nonmember | ____$45 | ____$55 | ____$65 | _____ |
| **Filipina Women Artists Theatre (10/22)** | | | | |
| _____FWN member | ____$40 | ____$50 | ____$60 | _____ |
| _____Nonmember | ____$50 | ____$60 | ____$70 | _____ |
| _____VIP front row reserved seating | | | ____$100 | _____ |
| **ADD: FWN Membership Dues** | | | | |
| ____ Individual membership $75/year | | | | _____ |
| ____ Student membership $35/year | | | | _____ |
| ____ Adopt-a-Filipina membership $75/year (membership in honor of a loved one) | | | | _____ |
| ____ Summit Scholarship Contribution | | | | _____ |

**TOTAL REMITTANCE AMOUNT:** _____

☐ **YES!** Sign me up. I have read the Filipina Summit schedule. Here's my payment.

Payment type: ☐ Check ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name _____ Title _____

Signature _____ Date _____

**Fill out form below if paying by credit card:**

Credit Card No. _____ Credit Card Verification No _____ . Exp.Date _____

Billing Address _____ City/State/Zip _____

**Please make checks payable and send to:**
Filipina Women's Network
P. O. Box 192143
San Francisco
CA 94119

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