



# PIONEER REVIEW CENTER INC.

3rd Floor National Book Store, 1921 C.M. Recto Ave., Sampaloc, Manila  
Tel. No. 7007-3824 | consult@perc.com.ph

## REGISTRATION FORM

(Please write in PRINT)

### REVIEW PROGRAM

ASCP REVIEW BATCH: \_\_\_\_\_ Write in the blank field the year you are enrolling for.

### PERSONAL DATA

Last Name | First Name | Middle Name

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Civil Status: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Religion: \_\_\_\_\_

2" x 2"  
ID Photo

### CONTACT INFORMATION

Mobile Number: \_\_\_\_\_ e-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Contact Person in Case of Emergency: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

### EDUCATION

Course Completed: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

School Attended: \_\_\_\_\_

Write your score in the blank field, write N/A if you have not taken the board exams yet.

General Average (Transcript): \_\_\_\_\_ General Average (Board Examination): \_\_\_\_\_

**NOTICE: ALL RESERVATION FEES AND TUITION FEES ARE NOT REFUNDABLE**


### MODE OF PAYMENT

(THIS PORTION IS TO BE ACCOMPLISHED BY PIONEER PERSONNEL ONLY.)

	Amount	Check No.	Date of Payment	Bank
Cash				
Reservation Fee				
Balance Payment				

### Agreement to Policy Guidelines

I have read and understand in full and agree to the Policy Guideline for Students issued to me by Pioneer Educational Review Center before enrolling into their Review Center. I will comply to their rules and standard regulations and fully understand the penalties involved should I fail to follow them.

Place signature inside the box. Please locate and click on this  icon in your PDF app, you can insert your signature by drawing or inserting a pre-existing scanned image sample of your signature specimen.

Signature over PRINTED NAME