**Emerging Leaders’ Summit 2019:**

**“Leading Self and Others in the**

**Age of Digital Disruption”**

**PROGRAM DESCRIPTION**

This program will shape the mindset of emerging leaders and influence them to develop a “High touch, high tech” approach to leadership.

**LEARNING OBJECTIVES**

Equip emerging leaders with valuable insights and practical approaches that allow them to lead self and other in the age of digital living.

**WHO SHOULD ATTEND**

Professionals who are entrusted and empowered to lead a team.

* Supervisors
* Functional managers
* Newly promoted executives

**RESERVE-NOW-BEFORE-IT'S-TOO-LATE!**

**TO REGISTER:**

1. Fill out the form below and email us at events@saltandlight.ph

2. Fill out the form and fax to 813-2745

3. Send the form together with your company check to

**Breakthrough Leadership Management Consultancy, Inc.**

**2/F HPL Building, 60 Sen. Gil Puyat Avenue, Makati**

**TO INQUIRE:**

1. Call 830 2191 or 887 1571, look for Miguel

2. Email us at events@saltandlight.ph

**EMERGING LEADERS SUMMIT 2019:**

**LEADING SELF AND OTHERS IN THE AGE OF DIGITAL DISRUPTION**

October 24, 2019 | 9:00 AM to 5:00 PM |SMX Convention Center Aura

*//source: ELS3\_October 24, 2019\_SMX Aura\_08*

**LEARNING INVESTMENT:**

|  |  |
| --- | --- |
| [ ] **Early Bird Rate:** Php 3,500 + 12% VAT (Until October 3, 2019)  | [  ] **Regular Rate:** Php 4,000 + 12% VAT(Until October 21,2019) |

\*For current promo and to avail free seats, call us at **813-2703/32** or email events@saltandlight.ph

**Workshop fee includes**:

* AM & PM snacks
* Lunch
* IDs
* Manuals
* Certificates

**TERMS:**

1. Participants availing of the **Early Bird Rate** will be given five (5) working days to settle their fees after the promo deadline. Next applicable rate shall apply if the participant fails to settle his/her fee within the five (5) working day period.
2. **Cancellation** seven (7) working days before the event, whether paid or unpaid, or a no-show during the event will not be honored. Failure to inform of your cancellation before the seven-day deadline will result to 30% charge to your account. This will serve as secretariat and banquet fee. Cancellation should be in writing and emailed or faxed to us.
3. Seminar participation may be transferred to another person in the same company.
4. If you wish to move your reservation to another seminar happening within the calendar year, please note that the rate of your updated seminar choice will be applied. Should the prevailing rate be higher than the initial learning investment already paid for, please settle the balance prior to the seminar date. Promo seats cannot be moved or transferred to another date or seminar.
5. We reserve the option to cancel or reschedule an event if minimum number of participants is not reached.
6. This reservation form, when completed, may also serve as your billing invoice.
7. All seminar fees must be prepaid.

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| --- |
| **COMPANY DETAILS** |
| **NAME OF COMPANY/ORGANIZATION(BIR-REGISTERED NAME)** |
|  |
| **COMPLETE ADDRESS (Address:Flr/Bldg/St.Village/Bgy./City)** |
|  |
|  |
| **INDUSTRY** |
|  |
| **PRODUCT/SERVICES OFFERED** |
|  |
| **WEBSITE                                                 COMPANY TIN# (REQUIRED)** |
| **[  ] VAT      [  ] Zero-Rated or VAT Exempt** |

*\*For zero-rated or VAT exempt companies, please include your Certificate of Exemption or PEZA registration. Provide Form 2307 or Certificate of Tax Withheld if payment done with tax withheld. Please withhold only 2% as we are classified as suppliers or contractors of services.*

**RESERVING OFFICER'S DETAILS       [  ] MR      [  ] MS      [  ] MRS      [  ] DR      [  ] PROF**

|  |
| --- |
| **FULL NAME** |
|  |
| **NICK NAME** |
|  |
| **CIVIL STATUS:  [  ]Single   [  ]Married** |
|  |
| **JOB TITLE/POSITION** |
|  |
| **TELEPHONE #                                                    FAX #** |
|  |
| **MOBILE #                                                            EMAIL ADDRESS** |
|  |
| **PERSONAL TIN *(for personal reservation)*** |

**PARTICIPANT'S DETAILS**

**PARTICIPANT 1                  [  ] MR       [  ] MS       [  ] MRS       [  ] DR       [  ] PROF**

|  |
| --- |
| **FULL NAME** |
|  |
| **NICK NAME** |
|  |
| **CIVIL STATUS:  [  ]Single   [  ]Married** |
|  |
| **JOB TITLE/POSITION** |
|  |
| **TELEPHONE #                                                    FAX #** |
|  |
| **MOBILE #                                                            EMAIL ADDRESS** |
|  |
| **PERSONAL TIN*(for personal reservation)*** |

Pls. check if:   [  ] Vegetarian   [  ] Food Allergy:  ­­­­­\_\_\_\_\_\_\_\_\_\_ [  ] Senior Citizen    [  ] Pregnant    [  ] PWD

**PARTICIPANT 2              [  ] MR       [  ] MS       [  ] MRS       [  ] DR       [  ] PROF**

|  |
| --- |
| **FULL NAME** |
|  |
| **NICK NAME** |
|  |
| **CIVIL STATUS:  [  ] Single   [  ] Married** |
|  |
| **JOB TITLE/POSITION** |
|  |
| **TELEPHONE #                                                    FAX #** |
|  |
| **MOBILE #                                                            EMAIL ADDRESS** |
|  |
| **PERSONAL TIN*(for personal reservation)*** |

Pls. check if:   [  ] Vegetarian   [  ] Food Allergy:  ­­­­­\_\_\_\_\_\_\_\_\_\_    [  ] Senior Citizen    [  ] Pregnant    [  ] PWD

**NOTE:**

* For more than two (2) participants, kindly add more sections to the registration form.
* Putting your mobile number is optional. It's only to be used in case we need to confirm or inform delegates of urgent, last minute changes and in case of emergencies, i.e. weather disturbances, speaker changes, etc.
* Kindly indicate your own TIN if making a personal reservation.
* Inform the secretariat by emailing events@saltandlight.ph if the seminar seat will be transferred to another participant within the same company.
* **Billing processing** takes two to three (2 to 3) working days upon receipt of your reservation.
* Please reconfirm your reservation if you do not receive your billing or any confirmation from us through email, call, or SMS.
* For **invoice/OR** concerns, please call Katherine Maglaque at (02) 889-1111 local 765.

**KINDLY SELECT ONE OF THE FOLLOWING PAYMENT METHODS:**

[  ] **By Cheque.** I will send check payment to your office on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[  ] **By Pick-up.** Please pick-up our check on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (time/date).

***Made payable to Breakthrough Leadership Management Consultancy, Inc.***

[  ] **By Bank Deposit.** (Scan copy of deposit slip with your name and seminar title and send to seminars@saltandlight.ph)

     Kindly remit the money to the following. bank details:

     Company Name: Breakthrough Leadership Management Consultancy, Inc.

     TIN #: 008-524-715-VAT

     Account #: BPI CA#3711-0082-83, Gil Puyat, Makati Branch

     Account #: Chinabank CA#143-176931-7 Gil Puyat, Makati Branch