



APPLICATION FOR ACCREDITATION AS MARKETER

(Form PRA-MKT-2011-01)

Application No.

PHILIPPINE RETIREMENT AUTHORITY

29/F Citibank Tower, Paseo de Roxas, Makati City, 1227 Philippines

Tel. No. (632) 8481412, (632) 8481418; Fax No. (632) 8481411

Email: inquiry@pra.gov.ph; Website: pra.gov.ph

PRA Receipt Date:

APPLICATION FORM FOR MARKETER ACCREDITATION (Entries must be TYPEWRITTEN)

Type (please check ✓)

New Application

Renewal

Classification (please check ✓)

Sole Proprietorship

Corporation

SRRVisa Holder

Partnership

Foreign-based Company

Others: _____

Name to be Registered as Marketer

Year Established

Primary Address (No Post Office Box please)

Country

Telephone No.

Fax No.

Email Address

Website

Secondary Address (No Post Office Box please)

Telephone No.

Mobile No.

Fax No.

Authorized Representatives

Name	Nationality	Contact No.

(Use a separate sheet if necessary)

Brief Company Description (Not more than 35 words)

Target Market

APPLICATION FORM - MARKETER

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Authorized Sub Marketer/s

Name	Authorized Representative	Contact No.

(Use a separate sheet if necessary)

How did you learn about the PRA? (please check ✓)

- PRA Website
 Brochure
 Magazines
 Newspaper
 PRA Newsletter
 Friends, families, associates
 TV
 Marketer
 Other websites
 Others. Please specify: _____

This is to certify that the company agrees to post above information on a government website owned by the Philippine Retirement Authority (PRA) and maybe used in other forms of advertisements related to PRA. Each marketer must submit a soft copy as attachment to pra.management.agency@gmail.com .

PRA does not gurantee, warrant or represent the information provided by the company. This is for informational purposes only and by signing Accreditation Form, the applicant agrees to release PRA from any liabilities and damages incurred by any party resulting from acts or omissions arising from any information obtained hereto.

Attach 2x2 photo taken not more than 6 months ago	By affixing my signature, I hereby certify that the information above are true and correct and that any misrepresentation on my part will be ground for denial of this application: _____ Signature of Applicant _____ Date Signed	<p>For PRA Use only:</p> Processed by: _____ Date signed: _____ _____ Recommended for Approval by: / Date _____ Approved by: / Date
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