



PAIDE

Philippine Association of Interpreters for Deaf Empowerment



SIGN LANGUAGE INTERPRETING SERVICE REQUISITION FORM

Requestor Name: _____

Last

First

Middle

Address: _____

Street

City/Province

Zip Code

Contact Information: _____

Home

Mobile

Email

Place of Interpreting Service: _____

Date of Interpreting Service: _____ From _____ To _____ AM/PM

Nature of Interpreting Service (please check):

- Religious (Php 350/hr) Educational – including classroom, meeting, seminar, conference (Php 350/hr)
- Social Events (Php 500/hr) Wedding/Baptism/Necrological Mass & Funeral (Php 500/hr)
- Legal (Php 500/hr) Medical (Php 500/hr) Performing Arts (Php 500/hr)
- Visa Interview Interpreting (Php 500/hr) TV Interpreting (Php 750/30 min)
- Others (please specify): _____

Mode of Payment: Cash

Cheque

All requests for sign language interpreting service should be made two (2) weeks before the event. The institution will highly appreciate if a free meal would be provided to the interpreter in the course of the interpreting session with the deaf. Transportation allowance will depend on the proximity of place, where interpreting service will be held, and will be discussed with PAIDE officer-in-charge.

Please send completed Sign Language Interpreting Requisition Form together with payment or deposit slip through email attachment at paide96@yahoo.com or FAX: 532-6316.

Kindly inform the office of the transaction made through our landline: 534-5512.

Payment in cash or in cheque should be deposited to:

PAIDE PSBANK ACCOUNT BONI AVE. BRANCH

Account Name: Philippine Association of Interpreters for Deaf Empowerment, Inc. or PAIDE, Inc.

Current Account No. 131-33200011-8

NOTE: Cheque payment should be made payable to PAIDE, Inc.

Thank you for your cooperation and support to our program.