

Registration Form

DELEGATE INFORMATION

Title (Please ✓): Prof. Dr. Mr. Mrs. Ms.

Last Name: First Name:

Department: Organization/ Institution:

Address:

Country: Postal Code:

Tel: Fax: E-mail:

Membership (Please ✓, if any):

- | | | |
|---|---|--|
| <input type="checkbox"/> Hong Kong Computer Society | <input type="checkbox"/> Hong Kong Society of Medical Informatics | <input type="checkbox"/> NursInfo (Hong Kong) |
| <input type="checkbox"/> Hong Kong Medical Association | <input type="checkbox"/> Hong Kong Telemedicine Association | <input type="checkbox"/> The Chinese University of Hong Kong |
| <input type="checkbox"/> Hong Kong Polytechnic University | <input type="checkbox"/> Hospital Authority | <input type="checkbox"/> The University of Hong Kong |

Registration Fee

(Please ✓ where appropriate)

Early Registration (on or before 1 December 2002)

Member*	<input type="checkbox"/> HK\$1000	<input type="checkbox"/> HK\$800
Non-member	<input type="checkbox"/> HK\$1200	<input type="checkbox"/> HK\$1000
Overseas	<input type="checkbox"/> US\$160	<input type="checkbox"/> US\$130
Student	<input type="checkbox"/> HK\$500	<input type="checkbox"/> HK\$500

(Full time or Sponsored Students)

*Member of one of the listed institutions/societies above.

Pre-Conference Workshops-23 January 2003

(Please ✓ where appropriate)

- | | |
|---|---|
| 1. Mobile Health Care - An introduction to mobile health care computing | <input type="checkbox"/> HK\$300/US\$40 |
| 2. A Clinician's Guide to Online Medical Knowledge (including the eKG) | <input type="checkbox"/> HK\$300/US\$40 |
| 3. A Practitioner's Guide to Clinical Decision Support | <input type="checkbox"/> HK\$300/US\$40 |
| 4. The HA's Clinical Management System - Tips for the Power User | <input type="checkbox"/> HK\$300/US\$40 <input type="checkbox"/> Complimentary for conference attendees |

HOSPITAL VISIT - 25 JANUARY 2003 (P.M.)

(Please ✓ to indicate your attendance)

- I will attend hospital visit to Tseung Kwan O Hospital in the afternoon of 25 January 2003.

PAYMENT DECLARATION

- Cheque** (We only accept cheques in Hong Kong currency payable to a bank located in Hong Kong)

I am enclosing a cheque no. for the total amount of
payable to "Hong Kong Academy of Medicine".

- Bank Draft**

I am enclosing a bank draft no. for the total amount of
payable to "Hong Kong Academy of Medicine".

- Credit Card**

Type of Card: Master Visa Expiry Date: /
mm yy

Name of Cardholder:

Card Number: - - - -

I hereby authorize "Hong Kong Academy of Medicine" to debit the stated amount from my credit card:

Total Amount: Signature: Date:

IMPORTANT NOTES

1. Entitlements of registered delegates

- * Participate in all scientific sessions
- * Coffee breaks and lunches during the Conference
- * Receive a set of official publications

2. Payment Method

Registration fees should be settled by cheque / bank draft (payable to Hong Kong Academy of Medicine) or credit card (only accept Master and Visa).

3. Official Receipt

A confirmation letter will be sent to registered participants upon receipt of registration form and full payment. This letter also serves the purpose as the Official Receipt. Please present the confirmation letter at the registration desk to obtain your delegate package. Registration forms not accompanied by appropriate amount will not be accepted.

4. Cancellation Policy

All cancellations must be made in writing to the Conference Secretariat on or before 1 December 2002. 20% of registration fee will be deducted as administrative expenses. All refunds will be issued in 30 days after the Conference.

5. Letter of Invitation

The Organising Committee will send a Letter of Invitation upon request. The invitation is intended to facilitate participant's travel and visa arrangements and does not imply the provision of any financial or other support.

6. Liability

All delegates are responsible for their own medical, accident and other necessary insurances.

7. Disclaimer

Whilst every attempt will be made to ensure that all aspects of the Conference mentioned in this announcement will take place as scheduled, the Organising Committee reserves the right to make last minute changes should the need arise.

Please complete and return this form to: **Conference Secretariat (MIC 2003)**



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Email: confdept@hkam.org.hk

Website: <http://www.hksmi.org>

