

REGISTRATION FORM



Division of Pain Medicine, Department of Anaesthesiology,
Hong Kong Sanatorium and Hospital

FIRST MULTIDISCIPLINARY MUSCULOSKELETAL ULTRASOUND SYMPOSIUM ON PAIN MANAGEMENT (MSK US PM)

4TH - 5TH DECEMBER 2010

(Saturday Symposium, Sunday Morning Workshop)

For Anaesthesiologists, Orthopaedic Surgeons, Pain Physicians, Neurologists, Neurosurgeons, Radiologists, Rheumatologists,
Nurses & Physiotherapists

Personal Details:

Title: Professor Dr. Mr. Ms.
First name: _____ Last name: _____
Department: _____ Specialty: _____
Hospital/Organization: _____
Address: _____
Tel: () _____ Fax: () _____
E-mail: _____ Signature _____

ALL ARE WELCOME , CME ACCREDITATION APPLIED

Registration: (Please ✓ your choice)

Category	# Member of IASP chapters Pain Organisation/# HKPS	Non-member & Overseas Visitor
Symposium Day 1	Regular member HKD\$800	HKD\$1200 (\$500 on site)
	^ Allied health HKD\$200 \$100 @AM/PM Satellite Session	^ Allied health HKD\$500 full day S.S
**Day 2 Hands-on Workshop	Regular Member ** HKD\$1500	HKD\$2000

Total: HKD \$ _____ + HKD _____ = HKD _____
Symposium Workshop Total

#Supporting IASP organisations: The Pain Association of Singapore; The Malaysian Association for the Study of Pain(MASP)
Thai Association for the Study of Pain (TASP); Hong Kong Pain Society(HKPS)

HKPS Membership information: - <http://www.hkpainsociety.org/memberships.html> www.iasp-pain.org

*Registration fee includes breakfast, Tea breaks, refreshment and lecture materials. Confirmation will be sent by email.

- The entire lecture fee is due upon registration. The Ultrasound Hands-On Workshop is limited to 36 physicians. Therefore, to reserve and secure your registration for workshop, fee must be paid on/before 25 Nov 2010."

* All registration fees are NON-refundable.

^ Separate Satellite Symposium close to main Symposium at separate venue

** Regular members of supporting organisation has priorities for registration till 8th Nov 2010

Registration Procedure

(Please return the completed form and send with appropriate payment to following address, Attn: Ms. Peggy Chiu)

Mail Address : Department of Anaesthesiology
2/F, Hong Kong Sanatorium & Hospital, 2 Village Road, Happy Valley, Hong Kong

Tel: (852) 2835 8828 Fax: (852) 2892 7542 E-mail: anaesthesiology@hksh.com or usgmskpm@gmail.com

Cheque payment: Cheque must be made payable to "Hong Kong Sanatorium & Hospital Limited".

Remittance Information: Beneficiary name: Hong Kong Sanatorium & Hospital Ltd.
Bank Account number: 020-611-120-0008-1
Bank name: Wing Lung Bank
Bank address: Happy Valley Branch, 44 King Kwong Street
Account currency: HKD IBAN# 020-611-120-0008-1 WUBAHKHH