

Hong Kong Pain Society Pain Education Series

Practical Management of Headache

Application Form:

Please delete as appropriate: Prof. / Dr. / Mr. / Ms. / Mrs.

Name of Applicant: (Surname) _____ (First name) _____

Correspondence Address:

Tel: _____ Fax: _____ Email Address: _____

Position: _____ Discipline/Specialty: _____ Clinic/Institution: _____

Course Fee (Please tick):

- Full course: HK\$ 200 (HKPS member)
- Full course: HK\$ 500 (non-HKPS member)

- Lecture on 7th Jan 2011 : HK\$ 250
- Lecture on 14th Jan 2011 : HK\$ 250

Total course fee: _____

Cheque No: _____ made payable to "**The Hong Kong Pain Society Limited**"

Signature

Date

The application form and the Cheque should sent to

Pain Education Series
Pain Management centre,
1/F, Alice Ho Miu Ling Nethersole Hospital,
11 Chuen On Road,
Tai Po,
N.T.

Deadlines for application: 25th December 2010

I hereby agree to abide by the rules and regulations of the Hong Kong Pain Society Pain Education Series: Practical Management of Headache

Application Procedures and Regulations:

1. Individual lecture registration is welcomed
2. Secretariat will send a letter of confirmation by email upon receipt of your registration form and full payment. Kindly check the letter of confirmation.
3. Fees are not refundable, except in the event of a course being oversubscribed or cancelled
4. The organizer reserves the right to amend the programme without prior notice. In the event of cancellation of the course, the only liability of the organizer is to refund all the fees paid.
5. No classes will be held when typhoon signal No.8 or above or black rainstorm warning is still hoisted after 12:00 noon. Please contact the Secretariat Ms Fiona Wong at 26892730 to enquire matters regarding cancellation of class due to typhoon or black rainstorm.