



REGISTRATION FORM

Deadline: 3 March 2017

Please return completed form and payment to: **HKSBP Secretariat c/o Kays Asia (Hong Kong) Limited**

PO Box 65015, Tseung Kwan O Post Office, Kowloon | Tel: 852-9658 9650 | Fax: 852-3010 8969 | enquiry@hksbp.org

1. PERSONAL INFORMATION *(Please type in BLOCK letters and ✓ where appropriate)*

Prof. Dr. Mr. Mrs. Ms.

Family name: _____ Given name: _____

Position: _____

Organization: _____

Address: _____

City: _____ Country: _____ Postal code: _____

Phone: _____ Fax: _____ E-mail: _____

2. REGISTRATION *(Please ✓ the activities you will attend)*

11 March 2017, Sat		Time	Venue
<input type="checkbox"/>	All Sessions	12:00 – 22:00	Nathan Room 1/F, Eaton Hong Kong 380 Nathan Road Kowloon
<input type="checkbox"/>	Lunch Symposium & Lectures	12:00 – 18:30	
<input type="checkbox"/>	Lectures & Dinner Symposium	14:00 – 22:00	
<input type="checkbox"/>	Lectures Only	14:00 – 18:30	
<input type="checkbox"/>	Lunch Symposium Only	12:00 – 14:00	
<input type="checkbox"/>	Dinner Symposium Only	19:00 – 22:00	
12 March 2017, Sun			
<input type="checkbox"/>	All Sessions	12:00 – 16:00	
<input type="checkbox"/>	Lunch Symposium Only	12:00 – 13:45	
<input type="checkbox"/>	Lecturers Only	13:45 – 16:00	

3. REGISTRATION FEES *(Please ✓ where appropriate)*

HKSBP Members* Free of charge

Non-HKSBP Members HKD450

Students^ HKD50

*Applies to all Paid-up Members. For membership annual renewal, please contact us.

^Student's registration is limited to Undergraduates & Postgraduates of Neuro-science, Mental Health and Medicine related subjects.

An official document from the appropriate department for verification is required.

4. PAYMENT – Registration is assured only upon receipt of registration fees.

I have arranged on (date) _____ by the below payment method (✓) in the above amount to be paid.

Cheque ETC Transfer with Receipt Telegraphic Transfer (T/T)

Account name: **Hong Kong Society of Biological Psychiatry Limited**

Bank name: The Hong Kong and Shanghai Banking Corporation Limited

Bank code: 004

Account No.: 400-289864-838

Branch code: 400

Bank Address: 1 Queen's Road Central Hong Kong

Swift Code: HSBCHKHHHKH

•Please mark reference with the full name of the participant on the payment receipt and send together with this Form.

•If the registration fee is made by T/T, please make sure that all bank transfer handling charges to be settled by the participant otherwise the cost difference is required to pay on the spot.

5. TERMS & CONDITIONS

5.1. Registration Form received without registration fees will **NOT** be processed.

5.2. Meeting programme is subject to change without prior notice.

5.3. In the unlikely event of cancellation of the Meeting, there is no refund for any paid registration fee.

5.4. The information provided will be used for registration and HKSBP promotion. For correction of personal data after submission, please forward the request to the HKSBP Secretariat.

*The above information may be used by HKSBP for incorporation in all or any of its database for sending the society's information to you.

Please tick the box if you do not want to receive any promotional and other materials from HKSBP via email, fax, post and any other means.