



香港感染及傳染病醫學會

THE HONG KONG SOCIETY FOR INFECTIOUS DISEASES

www.hksid.org

**Nineteenth Annual Scientific Meeting  
Registration Form**

Date: 14 March 2015 (Saturday)  
Time: 13:30 – 19:00 (Meeting)  
19:00 – 21:00 (Dinner)  
Venue: Jade Ballroom, 2/F., Eaton Smart Hong Kong Hotel  
380 Nathan Road, Jordan, Kowloon

Name: \_\_\_\_\_  
(Please use block letter)

Department: \_\_\_\_\_

Hospital / Clinic: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Registration:**

	Meeting	Dinner
<b>HKSID Member*</b>	<input type="checkbox"/> Waived	<input type="checkbox"/> Waived
<b>Trainee from HA / CHP, DH<sup>#</sup></b>	<input type="checkbox"/> Waived	<input type="checkbox"/> HKD 100
<b>Healthcare Staff from HA / CHP, DH<sup>^</sup></b>	<input type="checkbox"/> Waived	<input type="checkbox"/> HKD 250
<b>Non-member</b>	<input type="checkbox"/> HKD 100	<input type="checkbox"/> HKD 250

\* Membership must be valid for Year 2015. Membership will be verified before the registration is being processed

# Proof of status is required (e.g., letter from immediate supervisor or valid student card)

^ Full-time staff (medical doctors / nurses / allied-health professionals) working at HA hospitals or CHP, DoH

Please complete the registration form and return it to the meeting secretariat  
**on or before 28 February 2015.**

Cheque payable to: The Hong Kong Society for Infectious Diseases