



**Official Use**

Registration No.:

Date:

## **REGISTRATION FORM**

Completed registration form and a crossed cheque in Hong Kong Dollars payable to **THE CHINESE UNIVERSITY OF HONG KONG** should be mailed to the Symposium Secretariat. Confirmation will be sent via email.

### **Personal Details**

Please check the appropriate boxes

#### **Title**

Professor ☐ Dr. ☐ Mr. ☐ Ms. ☐ Miss ☐

First Name

Middle Name

Last Name

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Job Title

Department

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Organization

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Address Line 1

Address Line 2

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Address Line 3

Country

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Tel

Fax

Email

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### **The category best describes your profession**

Academic <input type="checkbox"/>	Administrative <input type="checkbox"/>	Allied Healthcare Professional <input type="checkbox"/>
Dietitian/Nutritionist <input type="checkbox"/>	Medical Practitioner <input type="checkbox"/>	Nurse <input type="checkbox"/>
Pharmacist <input type="checkbox"/>	Physiotherapist <input type="checkbox"/>	Podiatrist <input type="checkbox"/>
Scientist <input type="checkbox"/>	Technologist <input type="checkbox"/>	Others _____ <input type="checkbox"/>

### **How you learnt about this Symposium**

Past Participant <input type="checkbox"/>	Direct Mailing <input type="checkbox"/>	Website <input type="checkbox"/>	Facebook <input type="checkbox"/>
Friends and Colleagues <input type="checkbox"/>	Poster at Hospitals <input type="checkbox"/>		

### **First time attending this Symposium**

Yes ☐ No ☐



21st Diabetes and Cardiovascular Risk Factors -

# EAST *meets* WEST Symposium

Sep 28 – Sep 29, 2019 • Hong Kong Convention and Exhibition Centre

## Registration

## 21st East Meets West Symposium

(Sep 28 – 29, 2019)

### Early-bird Rate

(by Aug 15, 2019)

### Normal Rate

(after Aug 15, 2019)

### Delegates from Hong Kong or Macau

Medical Professionals	HKD 700 <input type="checkbox"/>	HKD 1,100 <input type="checkbox"/>
Allied Healthcare Professionals	HKD 400 <input type="checkbox"/>	HKD 600 <input type="checkbox"/>
Full-time Medical Students <sup>#</sup>	HKD 200 <input type="checkbox"/>	HKD 300 <input type="checkbox"/>

### Delegates from Supporting Organizations\*

Medical Professionals	HKD 500 <input type="checkbox"/>	HKD 800 <input type="checkbox"/>
Allied Healthcare Professionals	HKD 300 <input type="checkbox"/>	HKD 500 <input type="checkbox"/>

### Delegates from outside Hong Kong and Macau

All Categories	HKD 1,600 <input type="checkbox"/>	HKD 2,400 <input type="checkbox"/>
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### Please indicate the date(s) you want to join

September 28, 2019 ☐

September 29, 2019 ☐

September 28 & 29, 2019 ☐

<sup>#</sup> Medical Students – a copy of current student card for verification is required.

<sup>\*</sup> Supporting Organizations – please refer to the list of supporting organizations at [www.hkido.cuhk.edu.hk/EMW2019](http://www.hkido.cuhk.edu.hk/EMW2019). The discounted rate is only applicable to individual registrations (not applicable to sponsors).



## Hotel Reservation

Yes, please. ☐ Thanks, I will arrange on my own. ☐

No. of nights required: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Hotel	Room Rate Per Night (breakfast rate not included) <sup>#</sup>	Room Type
Kew Green Hotel Wanchai Hong Kong	HKD 890 <input type="checkbox"/>	Single <input type="checkbox"/> Double <input type="checkbox"/>
Renaissance Harbour View Hotel	HKD2,160 (Garden View) <input type="checkbox"/>	Single <input type="checkbox"/> Double <input type="checkbox"/>
The Harbourview Hong Kong	HKD 900 (Premier Plus) <input type="checkbox"/> HKD1,100 (Harbour View) <input type="checkbox"/>	Single <input type="checkbox"/> Double <input type="checkbox"/>

<sup>#</sup> The above rate is subject to 10% service charge and prevailing government tax (currently 0%) per room per night

<sup>#</sup> Room rate is subject to change according to hotel policies and is for reference only

Check-in Date: \_\_\_\_\_

Check-in Time: \_\_\_\_\_

Check-out Date: \_\_\_\_\_

Check-out Time: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## Enquiries

### Symposium Secretariat

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