

Basic Clinical Toxicology Course for Nurse 2010 Registration Form

Personal Data

Title ☐ Prof ☐ Dr ☐ Mr ☐ Ms

Name (English) _____ Name (Chinese) _____

Position _____

Department _____

Organization _____

Telephone _____ Mobile _____

E-mail _____

(Must fill in) _____

Please ☒ where appropriate

HA staff or HKSCT member	Others
☐ HK\$1,000	☐ HK\$2,000

Bank Name _____ Cheque No _____ Total _____

Signature _____ Date _____

Payment Method

- i Payment should be made in HK Dollars by cheque/ bank draft marked payable to “Hong Kong Society of Clinical Toxicology”.
- ii Payment should be sent with the completed registration form and payment to
Hong Kong Poison Information Centre, Room 2A, Block K, United Christian Hospital.

Official Receipt

Official Receipt will be issued upon payment of registration fee.

Deadline of Application

25th April 2010

Enquiry

Miss Bejyork Wong ☎ 3513 5089