



Course on Amputation Surgery and Prosthesis



10 June 2017 (Saturday), 2:00pm – 5:00pm

Lecture Theatre, 5/F, Professorial Block, Queen Mary Hospital

Organized by the Department of Orthopaedics and Traumatology, The University of Hong Kong

REGISTRATION FORM (for Credit Card Payment)

First name:	_____	Family name:	_____
Email:	_____		
Tel No.:	_____	Year of Training:	_____
Position:	_____	Hospital / Dept:	_____

*Payment:	On or before 31 March 2017	After 31 March 2017 or on site
Credit Card	HK\$ 200	HK\$ 300

Complete the attached credit card authorization form and send it to, **Department of Orthopaedics and Traumatology, 5/F Professorial Block, Queen Mary Hospital, Pokfulam, Hong Kong** or fax to 2817 4392 or email to jcytam0@hku.hk.

Registration fee is non-refundable. Receipt will be available on the event day.

* Please circle the appropriate item.

Credit Card Payment Authorization Form



I hereby authorize The University of Hong Kong to debit the following credit card in the total amount indicated below for payment of the registration fee of the Course on Amputation Surgery and Prosthesis.

Paying Card Number:	_____
Total amount to be debited (HK\$)	_____ / _____ / _____
Name (as shown on card):	_____
Expiry date	_____ (M) _____ (Y)
Authorized Signature	_____ Date