The 15th Hong Kong International Orthopaedic Forum
“Geriatric Bone & Joint Disorders”

21 - 22, April 2018
Cheung Kung Hai Conference Center, G/F, William MW Mong Block, 21 Sassoon Road, Pokfulam, Hong Kong.
Organized by the Department of Orthopaedics and Traumatology, The University of Hong Kong

REGISTRATION FORM (for Credit Card Payment)

First name: 
Family name: 
Title: *Prof / Dr / Mrs / Ms / Mr
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*Payment:

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<thead>
<tr>
<th></th>
<th>On or before 15 Feb 2018</th>
<th>After 15 Feb 2018 and on site</th>
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</thead>
<tbody>
<tr>
<td>Doctors</td>
<td>HK$ 650</td>
<td>HK$ 750</td>
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<tr>
<td>Allied Health &amp; Nurses</td>
<td>HK$ 400</td>
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<tr>
<td>Overseas Delegates</td>
<td>HK$ 1,400</td>
<td>HK$ 1,500</td>
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<tr>
<td>Overseas Trainees</td>
<td>HK$ 800</td>
<td>HK$ 960</td>
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Complete the attached credit card authorization form and send to: Orthopaedic Forum Secretariat, 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 15th Hong Kong International Orthopaedic Forum.

Paying Card Number: _____________________________________________________________

Total amount to be debited (HK$) ____________

Name (as shown on card): _______________________________________________________

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Authorized Signature: _______________________________________________________

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