



9 – 10 June 2018 • HONG KONG

Fee Waived
Official Use
Registration No.: _____
Date: _____

REGISTRATION FORM

(Complimentary for Members of Thai Association for the Study of the Liver (THASL))

One registration form must be completed for each participant. Please print or write legibly. Please ✓ the appropriate boxes.
(First come, first served for the first 50 members)

Personal Information			
Title:	<input type="checkbox"/> Professor	<input type="checkbox"/> Dr.	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
First Name:	Last Name:		
Job Title:			
Department:			
Organization:			
Address:			
Country:		E-mail:	
Tel: ()	Mobile: ()	Fax: ()	

Registration for IDDF 2018		
Category	Pre-registration (on or before 1 May 2018)	✓
Doctors	Fee waived	
Trainees / Students	Fee waived	
Allied Health Professionals / Nurses	Fee waived	

Signature: _____ Date: _____

Remarks:

<p>Please mail or fax the completed form to the Secretariat before 1 May 2018:</p>	<p>IDDF 2018 Secretariat MIMS (Hong Kong) Limited 27/F., OTB Building, 160 Gloucester Road, Wanchai, Hong Kong Fax: (852) 2559 6910 E-mail: registration@iddforum.com / jessie.tam@mims.com</p>
---	---