

1st MALAYSIAN DAY SURGERY CONGRESS

"ALL IN A DAY'S WORK"

REGISTRATION FORM

(Photocopies of this form are accepted)

PERSONAL PARTICULARS

Title : Prof / Dr / Dato' / Datin / Mr / Mrs / Ms

Full name : _____

Name on Badge (Limited to 15 letters)

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Institution : _____

Correspondence Address : _____

Post code : _____

Country : _____

Telephone : _____

Fax : _____

Email : _____

Specialty : _____

Dietary requirement : Vegetarian ☐

Non-vegetarian ☐

REGISTRATION FEES

	Before 1st April 2010	After 1st April 2010
Congress Fees	RM250	RM350
Workshop (Please tick ✓) only ONE workshop of your interest		
<input type="checkbox"/> Workshop 1 – Inhalational Anaesthesia (Max 50 per group)		
<input type="checkbox"/> Workshop 2 – TIVA/TCI (Max 50 per group)		
<input type="checkbox"/> Workshop 3 – Regional Anaesthesia-Improving yor blocks in day surgery (Max 25 per group)		
<input type="checkbox"/> PBDL1: Surgical Case Discussion (Max 100 per group)		
<input type="checkbox"/> PBLD2: Improving patient safety and through flow (Nurses) (Max 100 per group)		

Cheque or local orders (LPO) should be made payable to "College of Anaesthesiologists, AMM"

Date :

Signature :

MSA Secretariat Address:

G-1, Medical Academies of Malaysia, 210, Jalan Tun Razak, 50400 Kuala Lumpur.

Tel: 03 4023 4700, 03 4025 4700, 03 4025 3700 (Melvin) Fax: 03 4023 8100