



Hong Kong Society of Interventional Radiology Ltd.

2013 Training Course on Non-vascular Intervention Registration Form

Personal Information (Please type or print)

Name (English): _____

(Chinese): _____

Gender: M F

Institute: _____

Correspondence Address: _____

E-mail Address: _____

Telephone: _____

Member of HKSIR Yes No

You must be HKSIR member in order to register for the course. Please tick one of the below:

Application for HKSIR Membership (Free for 2013)

Renewal of HKSIR Membership (Free for 2013)

Registration Fee HKD\$500

Please return the completed application form, together with a crossed cheque made payable to the "**Hong Kong Society of Interventional Radiology**

Limited", to

Dr. Warren Leung

Department of Radiology, Pamela Youde Nethersole Eastern Hospital,

3 Lok Man Road, Chai Wan, HK

Signature: _____ **Date:** _____

For Official Use Only

Form received: _____ Amount received: _____

Registration No.: _____ Receipt No.: _____