



1st Singapore Thalassaemia Conference for Asia 2011
2 – 4 September 2011, Singapore
 Auditorium, Level 1, Women's Tower
 KK Women's and Children's Hospital
 100 Bukit Timah Road Singapore 229899

INDIVIDUAL REGISTRATION FORM

Book online at www.singaporethalassaemia.org or fax this completed form to +65 6475 2077

I. PERSONAL PARTICULARS OF DELEGATE (Please type clearly and use separate registration form for each delegate)

Identification: Dr Mr Ms Madam (please tick one)

First Name _____ / Middle Name _____ / Family Name _____
 Job Title _____ Department _____
 Company _____
 Mailing Address _____
 City _____ State _____ Postal Code _____ Country _____
 Country/Area Code _____ / _____ Phone _____ Fax _____ Mobile _____
 Email address _____

Accompanying Person(s)

Mr Mrs Ms _____ / _____
 First & Middle Name Family Name
 Mr Mrs Ms _____ / _____
 First & Middle Name Family Name

II. REGISTRATION FEE (Per Person)

	Early Registration Fee By 31 May 2011	Standard Registration Fee 1 June to 1 August 2011	On-site Registration Fee From 1 August 2011	Total Amount (SGD)
Doctors	SGD 350.00	SGD 400.00	SGD 450.00	
* Trainee / Nurse	SGD 200.00	SGD 250.00	SGD 300.00	
Patient / Parent	SGD 100.00	SGD 150.00	SGD 200.00	
Conference Dinner	SGD 180.00	SGD 180.00	SGD 180.00	
Total Registration Fee in Singapore Dollars (SGD)				

Please contact the Conference Secretariat for group registration

*** Trainee / Nurse**

I certify that during the 1st Singapore Thalassaemia Conference for Asia 2011, the aforesaid participant is currently a trainee / nurse. I hereby attach an official letter of certification to qualify the above said trainee / nurse / student for the Trainee / Nurse Registration rate.

Supervisor's Signature _____ Printed Name / Title _____ Institution / Department _____ Email _____

**** Patient / Parent**

If you are a patient or parent of the patient please sign here - Name of Parent / Patient _____ Signature _____

III. MODE OF PAYMENT CHECK OFF CHOICES. YOU ARE NOT REGISTERED UNTIL PAYMENT IS RECEIVED.

OPTION 1 : CREDIT CARD [please select one] VISA MASTERCARD AMERICAN EXPRESS

Card Holder's Name (as in credit card) : _____

Credit Card Number : _____ / _____ / _____ / _____ Expiry Date : _____ / _____
 (15 digits for AMEX, 16 digits for VISA / MASTER) (mm / yy)

For Amex credit card holders only, please fill in the four digits security numbers printed (non-embossed) on the right-hand corner of the card _____

For VISA credit card holders only, please fill in the three digits security numbers printed (non-embossed) on the signature panel on the reverse side of the card _____

I hereby authorise "2nd Singapore Thalassaemia Conference for Asia 2011" or "Ace:Daytons Direct (International) Pte Ltd" to debit my credit card with the total amount of:

_____ / + 5.0% administrative charge = _____ /
Amount of Registration Fee (SGD) TOTAL AMOUNT PAYABLE (SGD)

Signature of Cardholder : _____ / (Essential) Date of Authorisation : _____ / _____ / _____
 (Authorising Charge and Acknowledging Cancellation Policies) (dd / mm / yy)

Note : Should there be an error in the total amount made by the registrant, the Organiser of the "2nd Singapore Thalassaemia Conference for Asia 2011" and its Conference Secretariat "Ace:Daytons Direct (International) Pte Ltd" reserve the right to charge the correct amount.



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OPTION 2 : TELEGRAPHIC TRANSFER (TT)

TT Advice Number : _____ / Bank : _____ / Date of Issue : _____ /
 (dd / mm / yy)

_____ / + **SGD 50.00** (administrative charge) = _____ /
Amount of Registration Fee (SGD) **TOTAL AMOUNT PAYABLE (SGD)**

Signature : _____ Date of Authorisation : _____ /
 (By signing this form, I accept the conditions for payments, important notes as well as the cancellation policies) (dd / mm / yy)

Conditions for Payments by Telegraphic Transfer:

- All Telegraphic Transfers should reach the Conference Secretariat by **1 August 2011, Monday**.
- Telegraphic Transfers should be made payable to **"Singapore Thalassaemia Conference Asia"** in Singapore Dollar (SGD) at the amount shown above (See Section III, Option 2).

Please indicate clearly your name and address on the Telegraphic Transfer advice and fax it to:

Conference Secretariat & Housing Bureau c/o Ace:Daytons Direct (International) Pte Ltd
 2 Leng Kee Road #03-02, Thye Hong Centre Singapore 159086
 Tel: (65) 6379 5260 (admin) Fax: (65) 6475 2077 Email: admin@singaporethalasia.org

3. Beneficiary Bank's Details:

Bank Name : DBS Bank
Bank Address : 6 Shenton Way, DBS Building, Tower One Singapore 068809
Swift Code : DBSSSGSG

Beneficiary Details:

Bank Account No. : 027-901859-3
Bank Account Name : Thalassaemia Society (Singapore)

IV. IMPORTANT NOTES

• **How to Register**

- All participants are encouraged to visit the **website: www.singaporethalasia.org** for individual online registration which opens on **1 April 2011, Friday**.
- Alternatively, you can complete, sign on the registration form and send back, with the appropriate payment details and all related correspondence properly enclosed, to the Conference Secretariat at address stated above. Kindly note that registration forms received without payment or credit card authorisation will not be processed. Only individual registration will be accepted (one registration form per participant).
- For group registrations (groups of 10 pax or more), please contact the Conference Secretariat for group registration details and instructions. **All group registrations must be received by 1 August 2011, Monday**.
- If you have already registered online or faxed your registration form with a credit card payment, please do not mail a copy of this form as it may result in a duplicate registration.

▪ **Registration Fees**

All participants are required to pay the Basic Registration Fee (in Singapore Dollars) stated in the registration form, which includes the following:

- Full Delegate (Doctor / Trainee / Nurse / Parent & Patient)**
 - Name badge and conference bag
 - Admission to all scientific sessions at the 2nd Singapore Thalassaemia Conference for Asia 2011
 - Invitation to opening ceremony & welcome dinner
 - Two tea breaks per full-day conference
 - Certificate of Attendance

▪ **Registration Deadlines**

- Deadline for Early Registration : 31 May 2011, Tuesday
- Deadline for Group Registration : 1 August 2011, Monday
- Deadline for Standard Registration : 1 August 2011, Monday

▪ **Confirmation of Registration**

You will receive the confirmation either via email or fax only. Please include your email address and fax number clearly in the registration form. Please bring along your registration confirmation letter to the registration counters (located at the Auditorium, Level 1, Women's Tower) as proof of your payment.

▪ **Cancellations and Refunds**

Any cancellation and request for refunds must be submitted in writing to the **"2nd Singapore Thalassaemia Conference for Asia 2011 Conference Secretariat"** by **31 May 2011, Tuesday**. Refunds, less SGD 100 administrative fee & bank administrative charge, will be made within two months after the **2nd Singapore Thalassaemia Conference for Asia 2011**. No refunds will be made for requests received after **31 May 2011, Tuesday**.

▪ **On-Site Registration**

For on-site registration, only cash (Singapore Dollars) and credit card payments will be accepted. The registration and information counters will be located at the Auditorium, Level 1, Women's Tower of the Conference Venue.

▪ **Conference Dinner**

Gala Banquet is payable at SGD100.00 per delegate or per accompanying person and it is optional.

▪ **Conference Venue**

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 Auditorium, Level 1, Women's Tower
 100 Bukit Timah Road Singapore 229899

▪ **Language:** The official language of the congress is English.