





Geriatric Care for Nursing Professionals 2018

(17th & 24th Apr 2018)

Application Form

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Surname		Given Name	
Hospital / Institution		Discipline / Specialty	
Position			
Nacilina Adduses			
Mailing Address			
Tel No. (Office)		(Mobile)	
Email		Fax No.	
Detail of Payment: To "NU PRO (Asia) Ltd." Total Amount: HK\$ By Cheque □ Cheque No: Name of bank:			
Part B – Detail of Payment (please tick the appropriate box) Detail of Payment: To "NU PRO (Asia) Ltd." Total Amount: HK\$ By Cheque			

Part C – Other Information

- 1. Post the Crossed Cheque AND the Application Form to "Nu Pro (Asia) Ltd." at Rm. 1104 - 05, 11/F, Capitol Centre, 5-19 Jardine's Bazaar, Causeway Bay, Hong Kong
- 2. Email the ATM Receipt and the Application Form to winkyfong@nupro-asia.com or by Fax: 2890 2713
- 3. Seat are limited, please send in your registration today.
- 4. Applicants will be notified of the application result within five working days upon receipt of application form and payment.

For enquiries, please contact:

Nu Pro Nurse Centre

Ms. Winky Fong

Tel: (852) 2273-8282 Fax: (852) 2890-2713 Email: winkyfong@nupro-asia.com

Notes For Enrollment

- 1/ Registration fee is not refundable unless the enrolled course is full or cancelled.
- 2/ Payment must be received together with application form.
- 3/ The Organizers reserve the right to make alteration regarding seminar schedule, venue and content if necessary.
- 4/ The personal data provided on the Application Form is used for purposes related to the processing of registration and delivery of information. You have the right to access and correct personal data according to section 18 and 22 of the Personal Data (Privacy) Ordinance. Enquiries or correction should be assessed through Nu Pro Nurse Centre.