

Nu Pro & Solutions

Advanced Wound Care Workshop (WW-051205CE) (24 , 29th August 2017)

Application Form

Part A – Personal Particulars

Surname	Given Name
Hospital / Institution	Specialty
Position	
Mailing Address	
Tel No. (Office)	(Mobile)
Email	Fax No.

Part B – Detail of Payment (please tick the appropriate box)

Detail of Payment: To "NU PRO NURSE CLINIC"

Total Amount: HK \$1,400 (Course fee: \$1,300 / Administration fee: \$100)

By Cheque D Cheque No: ______ Name of bank: ______ By

ATM 🛛 Hang Seng Bank, Account number: 383-527645-883

Part C – Other Information

1. Post the Crossed Cheque AND the Application Form to "Nu Pro Nurse Clinic" at

Rm. 1104 – 05, 11/F, Capitol Centre, 5-19 Jardine's Bazaar, Causeway Bay, Hong Kong 2.

Fax the ATM Receipt AND the Application Form at 2890-2713

3. Application Deadline is 17 August 2017.

4. Applicants will be notified of the application result by seven days before the workshop begins.

For enquiries, please contact:

Nu Pro Nurse Clinic

Ms. Katharine Ng

Tel: (852) 2273-8285 Fax: (852) 2890-2713 Email: katharineng@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 by us on or before the application deadline (on or before 17 August 2017).

3/ The Organizers reserve the right to make alteration regarding workshop 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 Clinic.