



ROYAL BERKSHIRE HALL ROYAL BRUNEI POLO & RIDING CLUB, JERUDONG
1ST MAY 2016 8AM - 4 PM

REGISTRATION FORM

Please complete all sections and return with payment to "GleneaglesJPMC Cardiology Nursing & Allied Health Professionals Conference" Secretariat, Gleneagles JPMC Sdn Bhd, Jerudong Park, Jerudong BG3122. Brunei Darussalam or fax to (673) 2612 820

For enquiries please contact the Gleneagles JPMC Conference Secretariat: Ms Connie AR (673)2611883 Ext 2916 , Ms Sharon (673) 8730786 , Ms Nurizzah (673)8722466 or Email: connie_ar@gleneaglesjpmc.com.bn for any inquiries.

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REGISTRATION FEE ✓ (please tick)

<input type="checkbox"/>	Registration fee B\$ 30.00 for those registering for the Conference before 20th April 2016
<input type="checkbox"/>	Registration fee B\$ 40.00 for those registering for the Conference after 20th April 2016

DEADLINE FOR REGISTRATION IS 29th April 2016

INDIVIDUAL REGISTRATION FORM (PLEASE COMPLETE FORM IN BLOCK LETTERS)

PARTICIPANT PARTICULARS

Name:

Institute / Company Name:

Mailing Address:

Country:

Post Code:

Email:

Telephone:

METHOD OF PAYMENT Registration will only be accepted & confirmed upon receipt of payment.

Please tick (✓) where applicable:

☐ Cash

☐ Telegraphic Transfer to Gleneagles JPMC Sdn Bhd, Hong Kong & Shanghai Banking Corporation (HSBC), Jerudong Branch. Negara Brunei Darussalam. Account No: 001-511328-001, in Brunei Dollars. Please bring along your receipt as proof of payment.

**CANCELLATION / TRANSFER POLICY: No refund will be made for any cancellation.
No transfer of registered name allowed.**

For committee use only:

☐ Payment

☐ Certificate

☐ Registration

☐ Checked By: