

REGISTRATION FORM

17th Continuing Professional Development (CPD) Series:

"Diabetes Asia 2018" Conference

July 26-29, 2018

Borneo Convention Centre Kuching (BCCK), Kuching, Sarawak, MALAYSIA

Please tick '✓' where applicable

Specialist General Practitioner Medical Officer Nurse Dietitian
 Medical Assistant Pharmacist Others: Please specify _____

Please type or print your particulars in **BLOCK** letters.

Name: Prof/Dr/Mr/Mrs/Ms

Family Name/ Surname (If any):

Organisation:

Mailing Address:

Postcode: State: Country:

Telephone (Off): (M):

Fax: E-mail:

Name to appear on conference certificate:

Name to appear on conference name tag:

Submit for a **FREE PAPER** presentation (oral / poster)*

Submit for **PROFESSOR MUSTAFFA YOUNG INVESTIGATORS' AWARD****

Meals: Normal Vegetarian

*Delete whichever is not applicable ** Oral presentation only; please fill in the **Declaration Form**

Conference Venue:

**Borneo Convention Centre Kuching (BCCK)
The Isthmus, Sejingkat, 93050 Kuching
Sarawak, MALAYSIA**

Conference Fees

Local Delegate

REGISTRATION	Conference Fee*	GST** (6%)	Total payable	Please tick
EARLY BIRD REGISTRATION (before May 31,2018)	RM 780	RM46.80	RM 826.80	
AFTER May 31, 2018	RM 880	RM52.80	RM 932.80	

* *Subsidised rates*

** *GST (Goods and Services Tax)*

International Delegate

REGISTRATION		Please tick
EARLY BIRD REGISTRATION (before May 31,2018)	EARLY BIRD REGISTRATION (before May 31,2018)	
AFTER May 31, 2018	AFTER May 31, 2018	

NOTE: Special discount is available for group booking and attendance to both DCOM and DAC 2018. Please check with the Secretariat. Thank you.

Cancellation & Transfer

- If you are unable to attend, a replacement participant is allowed at no extra cost provided written notice is given prior to the Conference.
- A 90% refund can be made for cancellation received in writing or by fax at least 4 weeks before the Conference.
- A 50% refund will be given if cancellation is received 14 days before the Conference.

Mode of Payment^^

I enclosed herewith Crossed Cheque/Bank Draft/Money Order/Local Order^^

(No.) of USD/RM

Signature

Date

^ Crossed Cheque/Bank Draft/Money Order/Local Order should be made payable to the **NATIONAL DIABETES INSTITUTE**

^^ Please visit eepurl.com/c-INpH on your internet browser for **ONLINE REGISTRATION & PAYMENT DETAILS**.

^^^ Payments made through Crossed Cheque /Bank Draft/Money Order/Local Order should be sent directly with the **registration form** to the **Conference Secretariat**.

Secretariat Address:

National Diabetes Institute (NADI)
No.1, Jalan SS3/50,47300 Petaling Jaya, Selangor, MALAYSIA
Email: enquiry@nadidiabetes.com.my
Website: diabetesmalaysia.com.my
Tel: 603 - 7876 1676 / 1677 Fax: 603 - 7876 1679