Paediatric Anaesthesia Meeting PAM 2013

Date: **22nd - 23rd March 2013**Venue: **Shangri-La Hotel, Kuala Lumpur**

REGISTRATION FORM

(Photocopies of this form are accepted)

Conference Secretariat

College of Anaesthesiologists Academy of Medicine of Malaysia

G-1 Medical Academies of Malaysia, 210 Jalan Tun Razak, 50400 Kuala Lumpur **Tel:** (603) 4023 4700, 4025 4700 **Fax:** (603) 4023 8100

Full Name				
(Please u	ınderline surname)			
Preferred Name on Badge			(Limited	to 15 alphabets
Institution				
Correspondence Address				
Tel	Fax			
Email	Specialt	у		
REGISTRATION FEES				
Category	On or before 31st December 2012	1st January 2013 to 15 th March 2013	On Site	Amount
 Member of College of Anaesthesiologists Member of Malaysian Society of Anaesthesiologists Medical Officer Allied Health Professional 	RM 400	RM 450	RM 550	
 Non-Member of College of Anaesthesiologists Non-Member of Malaysian Society of Anaesthesiologists 	RM 450	RM 500	RM 600	
Pre-Congress Workshops				•
*Paediatric TIVA	RM 75	-	-	
*Paediatric Difficult Airway	RM 75	-	-	
* Limited to 30 participants		,	ГОТАL	

PAYMENT

All payments by cheques should be issued in favour of "College of Anaesthesiologists, AMM" Payments can be made via telegraphic transfer to the following account:

Account Name : College of Anaesthesiologists, AMM

Account Number : 1408-1195249-05-0 Name of Bank : CIMB Bank Berhad

Address of Bank : KL Main Branch, No 11 Jalan Raja Laut, 50350 Kuala Lumpur

Swift Code : CIBBMYKL

(Please return the remittance advice note along with this form either by fax or email. Document image by email is also acceptable.)

Date Signature