

Hong Kong – Taiwan Paediatric Orthopaedic Symposium

Lecture Hall, 3rd floor Li Ka Shing Physiotherapy Building, DKCH

Registration Form

Contact Information

Last Name: _____ First Name: _____

Department: _____ Hospital: _____

Corresponding Address: _____

Phone: _____ Fax: _____

Email: _____

I will be participating in the following sessions:

4 March 2017, 16:00 – 18:00

5 March 2017, 08:30 – 13:00

Research Meeting:

- I will present a paper!
- Passive participant

Clinical Case Presentation:

- I have a case to discuss!
- I will bring a patient!
- Passive participant

Spaces are limited. We will give priority to active participants!

Yes, I need to reserve parking at DKCH. License plate: _____

Registration is free.

Please send completed registration form by **February 18, 2017** to:

Dr Evelyn Kuong, Dept of O&T, Duchess of Kent Children's Hospital, Sandy Bay, Hong Kong

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Fax: 2974 0621

Email: evelynkuong@ortho.hku.hk