

## REGISTRATION FORM

# APAGE 2<sup>nd</sup> NOTES Live Hand-on Workshop, Thailand 19<sup>th</sup>-21<sup>st</sup> December 2018

Affiliation 醫院

First Name 姓 Surname 名

Gender 性別 Male 男 Female 女 E-Mail 電子信箱

Mobile 電話 Address 地址

#### **Registration Fee**

USD\$3,000 3-day Live Hands-on + lecture sessions 手術實作+演講課程

USD \$500 Lecture-only 演講課程

APAGE member received 20% off on registration fee before make the payment. APAGE會員可享報名費20%折扣。

APAGE/TAMIG/PSGE member, Member ID or duration

Registration includes lunches and free entrance to welcome reception during the workshop. 報名內含午餐及歡迎晚宴。

Welcome Reception (Wednesday, 19th December)

Lunch on Day 1 (Wednesday, 19<sup>th</sup> December)

Lunch on Day 2 (Thuesday, 20th December)

Lunch on Day 3 (Friday, 21st December)

Please state if you have any special dietary requirements such as vegetarian, no beef, etc.

若有任何飲食上之特殊限制請事先告知

#### **Registration Information**

There will be only 10 slots available to the Live Hands-on, please register and complete payment before 30 November, 2018.

因此研討會較特殊,手術室名額僅限10位,請於11月30日前繳交報名表和註冊費。

There is no on-site registration. The registration fees will only be accepted by WIRED TRANSFER with FULL payment in US currency. The registration fees do not include expenditures of flight, local transportation and accommodation.

無現場報名,報名費僅由對方帳戶匯款繳費,不包括機票、當地接送和住宿。

#### Declaration

I declare that I have read, understand and fully agree with above information. The Workshop Organizer reserves the right to retain all fees paid in the event of non-attendance at the workshop. 我已閱讀並同意以上所列的條款和條件達成一致。如臨時取消參加,主辦方將不退還註冊費。

Signature 簽名

\*Date 日期

SOCIA

Please send the completed registration form to APAGE Secretariat via  $\underline{\text{mit.apage@gmail.com or apage.edu@gmail.com}}$  or FAX to +886-3-2110050  $^{\circ}$ 

完成填寫後,請將報名表寄送至mit.apage@gmail.comorapage.edu@gmail.com或傳真至+886-3-211-0050。

## APAGE REMITTANCE INFORMATION

#### Bank Info 銀行名稱

YUANTA COMMERCIAL BANK CO., LTD 元大商業銀行

\*If it is OBU account, the beneficiary bank will be: YUANTA COMMERICAL BANK CO., LTD OBU BR.

## A/C Bank Address 匯款地址

3F, No. 210, Sec.3, Chengde Rd., Taipei 103, Taiwan 103 台灣台北市承德路三段 210 號 3 樓

#### Beneficiary 收款機構

The Asia-Pacific Association for Gynecologic Endoscopy and Minimally Invasive Therapy

(Please make sure to write in full name 請填寫完整名稱)

## Beneficiary Address 收款地址

No. 5, Fuxing St., Guishan Dist., Taoyuan City, 33305, Taiwan 33305 台灣桃園市龜山區復興街五號

#### Telephone 電話

00886-3-3281200 #8253

#### A/C Number 帳號

0622 2800 02567

SWIFT Code 國際銀行代碼

**APBKTWTH** 

#### Currency 幣別

USD 美金

