

## **REGISTRATION FORM HEPATITIS AND HEPATOCELLULAR CARCINOMA UPDATE 2011:**

A Multidisciplinary Approach, 12 August 2011 Penang Hospital 2011

Ms.Azizon Bt Saad

Ms.Aiza bt Ghazali

Name:						
Name on badge:						
Institution:						
Address:						
Tel:	Fax: _					
Email:						
Vegetarian:	Non-vegetarian:					
REGISTRATION FEE	ES:					
CATEGORY		FEE				
Doctor Nurse/Paramedic		RM50.00				
Nurse/Farameuic		RM30.00				
All payments are to be issued in favour of, "Postgraduate Medical Education Society Penang Hospital", Account no: 5070 7731 0945 (Maybank)						
Kindly fax or e-mail the <u>registration form</u> and <u>receipt payment</u> to the secretariat. CLOSING date has been extended to 26 July 2011						
Tel: 04 2225814/2225837 Fax: 04 2225605 E-mail: endoscopy.hpp@gmail.com Website:www.gastrohepato.com/update						
Endoscopy Unit Penang Hospital Residensi Road 10990 Penang	Woodske www.	поразоволи араах				
Signature:	Date:					
Please kindly forward your enquires to:						
Dr.Ooi Boon Phoe	Organizing Chairm	nan	04-2225756			

Chief Coordinator

Secretary

04-2225837 04-2225814