



مستشفى الملك فيصل التخصصي ومركز الأبحاث  
King Faisal Specialist Hospital & Research Centre  
Gen. Org. مؤسسة عامة

Receipt No.: 2018-000-\_\_\_\_\_

## 18<sup>TH</sup> ANNUAL SURGICAL RESEARCH DAY

Thursday, 06 December 2018  
7:30 AM – 4:00 PM, King Salman Auditorium

**Registration Fee: SR50**

ID#: \_\_\_\_\_

### REGISTRATION FORM

First and Middle Names: (as you wish it to be printed on the certificate)

Last/Family Name: (as you wish it to be printed on the certificate).

TITLE:  Dr.  Prof.  Mr.  Mrs.  Miss  Others

GENDER:  Male  Female

**REQUIRED:** Saudi Commission for Health Specialties License No. (i.e. 05-R-N-85201):

Institution/ Hospital:

Profession:

Telephone:

Email Address :

Fax:

City/Postal Code:

Mobile:

Mailing Address/ MBC:

#### FOR REGISTRATION CONTACT:

Junry Tagupa (Ext. 44-27752)  
Department of Surgery (MBC 40)  
King Faisal Specialist Hospital & Research Centre  
PO Box 3354, Riyadh 11211  
Kingdom of Saudi Arabia  
Fax No.: 44-24620/ 44-27772  
Email: [Surgery-Riyadh@kfshrc.edu.sa](mailto:Surgery-Riyadh@kfshrc.edu.sa)

Registrations will be confirmed by the Secretary through a given a registration number.  
Please contact us for this number.

*Confirmed Registration:*

*Registration# \_\_\_\_\_ Date Received: \_\_\_\_\_*