REGISTRATION FORM

"The 4th International Pain Management Symposium" 3-5 October 2019 / 4-6 Saffar 1441

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IMPORTANT INFORMATION:

- 1. Registration is **NOT CONFIRMED** until payment is received.
- 2. Payment is accepted in cash at CME Office, KFSH&RC
- **3.** Cash deposit or bank transfer should be payable to:

Account Name: Academic Affairs Postgraduate Funds

Bank Name: Al Rajhi Bank

Bank Address: KFSH&RC Branch, Takhassusi st.

IBAN: SA5580000 114 608 010035171

4. All paid registration fees are **NON-REFUNDABLE**.

Please send registration form, and copy of transfer or bank receipt to:

websymposia@kfshrc.edu.sa

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