1st International Pediatric Chronic Care and Disability Conference

02-04 April 2017 (05-07 Rajab 1438)

VENUE: Sultan Bin Abdulaziz Humanitarian City (Transportation will be available at KFSHRC-ITA Bus Stop at 07:00AM & 08:00AM)

REGISTRATION FORM

Registration No.

NOTE: Please print <u>clearly</u> and ensure that you use the correct spelling of your name as you wish it to be printed on the certificate.

First Name:

Last Name:

Middle Name:

Gender:	□ Male		□ Fema	e SCFHS#	SCFHS#	
Institution						
Address:	City:			Fax No.:		
	Postal Code:			Mobile / Tel. No.:		
	Country			Email:		
Registration Fees		Consultants	Non-Physicians	Students		
Early Registration Until 15 March 2017		300 SR	200 SR	100 SR		
Late/Onsite By 16 March 2017			350 SR	250 SR	100 SR	
WORKSHOP FEE:		NOTE: Conference is pre-requisite to register for a workshop				
One (1) workshop (Limited seats only)		75 SR	 □ Workshop 1: Seating and Positioning Workshop □ Workshop 2: Home Caring of Child with Technology Dependency □ Workshop 3: Nutrition in Chronic Care □ Workshop 4: Airway Management 			
FOR INFORMATI	ON AND	PAYME	ENT OPTIONS:			
 Registration is not confirmed until payment is received. Payment is accepted in cash at CME Office, KFSHRC Cash deposit or bank transfer should be payable to: Account Name: Academic Affairs Postgraduate Funds Bank Name: Al Rajhi Bank Bank Address: KFSHRC Branch, Takhassusi Street IBAN: SA5580000 114 608 010035171 Cancellation/Refund Policy: Request for refund must be received one (1) month prior to symposium. Administrative fee of SR50 will be deducted from all refunds. 				Send payment and Registration Form to: Academic & Training Affairs – CME Section King Faisal Specialist Hospital & Research Center MBC-36, P.O. Box 3354, Riyadh 11211, KSA Tel. No.: +966-11-442 7238		