

REGISTRATION FORM

'NADI ADVOCATE' FOR GENERAL PRACTITIONERS NADI Regional Diabetes Course

****Kuantan 27-28 October, 2018**

****Johor Bharu 8-9 December, 2018**
(please choose one).

Please tick '√' where applicable

General Practitioner Others: Please specify _____

Please type or print your particulars in **BLOCK** letters.

Name: Dr.

Family Name/ Surname (If any):

Organisation:

Mailing Address:

Postcode: State: Country:

Telephone (Off): (M):

Fax: E-mail:

Name to appear on certificate:

Name to appear on name tag:

Meals: Normal Vegetarian

NADI Regional Diabetes Course

****Kuantan 27-28 October, 2018**

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(Venue to be confirmed)

'NADI ADVOCATE' FOR GENERAL PRACTITIONERS FEE

Local Delegate Only

REGISTRATION FEE	Course Fee*
	RM 450.00

* *Subsidised rate*

Cancellation & Transfer

- If you are unable to attend, a replacement participant is allowed at no extra cost provided written notice is given prior to the Course.
- A 90% refund can be made for cancellation received in writing or by fax at least 4 weeks before the Course.
- A 50% refund will be given if cancellation is received 14 days before the Course.

Mode of Payment

I enclosed herewith Crossed Cheque/Bank Draft/Money Order/Local Order

(No.) of RM

Signature

Date

^ Crossed Cheque/Bank Draft/Money Order/Local Order should be made payable to the **NATIONAL DIABETES INSTITUTE**

^^ Payments made through Crossed Cheque /Bank Draft/Money Order/Local Order should be sent directly with the **registration form** to the **Regional Diabetes Course Secretariat**.

Secretariat Address:

National Diabetes Institute (NADI)
No.1, Jalan SS3/50,47300 Petaling Jaya, Selangor, MALAYSIA
Email: enquiry@nadidiabetes.com.my
Website: diabetesmalaysia.com.my
Tel: 603 - 7876 1676 / 1677 Fax: 603 - 7876 1679