

Registration Form

Delegate Details

Title: Prof Dr Mr Mrs Ms

Given Name: _____ Surname: _____

Affiliated Organisation/Institution: _____

Address: _____

State: _____ Postcode: _____ Country: _____

Phone: () _____ Mobile: () _____ Fax: () _____

E-mail: _____

Are you vegetarian? Yes No

Please tick if you are member of ISPD Membership Number: _____

(Delegate who provides an invalid membership number will be charged Non-member registration fee)

Registration Rate

Category	Early registration (before 1 st May 2012)	Normal Registration (after 1 st May 2012)	Local Registration/ Developing Countries*	Amount (RM)
ISPD Member	<input type="checkbox"/> RM 1,600 (approximately USD 500)	<input type="checkbox"/> RM 1,760 (approximately USD 550)	<input type="checkbox"/> RM 1,120 (approximately USD 350)	
Non-ISPD Member	<input type="checkbox"/> RM 1,920 (approximately USD 600)	<input type="checkbox"/> RM 2,080 (approximately USD 650)	<input type="checkbox"/> RM 1,344 (approximately USD 420)	
ISPD Member, Allied Health*	<input type="checkbox"/> RM 912 (approximately USD 285)	<input type="checkbox"/> RM 1,072 (approximately USD 335)	<input type="checkbox"/> RM 640 (approximately USD 200)	
Non-ISPD Member, Allied Health*	<input type="checkbox"/> RM 1,136 (approximately USD 355)	<input type="checkbox"/> RM 1,232 (approximately USD 385)	<input type="checkbox"/> RM 800 (approximately USD 250)	

Pre-Congress Workshop RM 300 (approximately USD 94)

Please tick: Basic Science CME CME for Physicians CME for nurses and allied health

Congress Banquet RM 300 (approximately USD 94)

* Payment is based on the exact amount depreciated in Ringgit Malaysia (RM)

* A letter of verification of the Allied Health Personnel status from the Head of Department/ Unit must be emailed to the Congress Secretariat upon registration.

* Please refer to the Congress Website for the list of Developing countries

* Please contact the Congress Secretariat for Letter of Invitation for Visa applications

Total (RM)

Payment

1. Credit Card

VISA Mastercard AMEX

I have authorised the **14th Congress of the International Society for Peritoneal Dialysis** to debit the total amount of RM _____ from my credit card for the settlement of the above mentioned fees.

Name of Card Holder: _____

Card Number: _____ Expiry Date (mm/yy): _____

Card Issuing Bank: _____

CBC Code: _____

* Visa/Master : The last three digits on the reverse side of your card

* Amex : The four digit number on the left/right side of the card

Card Holder's Signature: _____ Date (dd/mm/yy): _____

2. Company Cheque (for Malaysians only)

Cheque Number: _____ Issuing Bank: _____

Date of Transaction: _____

3. Local Order (for Malaysians only)

LO Reference No: _____

4. Telegraphic Transfer

T.T. Reference No: _____ T.T. Bank: _____

Date of Transaction: _____

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Terms and Conditions:

- All payments should be made in RM. International delegates can make payment by Credit Card, or Telegraphic Transfer. Malaysian delegates can make payment by Local Cheque or Local Order.
- Please note that all related bank charges, financial charges or credit card commission (5%) are to be borne by the delegates and are not to be deducted from the fees payable to the Congress.
- * Telegraphic Transfer (T.T) to the following:

Account Name : **14th ISPD**
Account No : **514 3567 31251**
Bank Name : **Malayan Banking Berhad**
Bank Address : **Wisma Genting Branch
Jalan Sultan Ismail
50250 Kuala Lumpur**
SWIFT code : **MBBEMYKL**

**Please fax the T.T slip to the Secretariat.*

Confirmation

- Registration will only be confirmed upon receipt of **FULL PAYMENT**.
- Upon receipt of the FULL payment, the Congress Secretariat will send you a Confirmation Letter via email.
- Please bring along the Confirmation Letter and present it at the time of Registration at the Congress.

Cancellation Policy

- Cancellation of registration must be made in writing to the Secretariat. Refunds will only be made after the Congress.
 - Cancellation received on or before **1st May 2012** : 100% refund (minus an administration fees of USD 30).
 - Cancellation received between **2nd May 2012 and 15th August 2012** : 50% refund.
 - Cancellation received after **15th August 2012** : No refund.

**Paid registration fee is not refundable after the stipulated date for whatever reasons including failure of obtaining VISA.*

Please forward the completed Registration Form to:

Congress Secretariat
Console Communications Sdn Bhd
Suite 12.9, Level 12, Wisma UOA II
21, Jalan Pinang 50450 Kuala Lumpur
Tel: +603 2162 0566 Fax: +603 2161 6560
Email: ispd2012@console.com.my
Website: www.ispd2012.org.my

Early Registration Deadline
1st May 2012