

**EVIDENCE-BASED DIABETES CARE WORKSHOP: FIT-MY INJECTION TECHNIQUE
GUIDELINE AND MEDICAL NUTRITION THERAPY (KUCHING, SARAWAK) YEAR 2020**

REGISTRATION FORM

A. DELEGATE DETAILS

Prof / Dr / Mr / Mrs / Ms _____

(Please fill in BLOCK LETTERS)

Doctor Nurse Pharmacist Diabetes Educator Others: _____

Organisation: _____ Department: _____

Address: _____

Postcode: _____ State: _____ Country: _____

Telephone: _____ Ext: _____ Mobile: _____

Fax: _____ E-mail: _____

Are you Vegetarian: Yes No

B. REGISTRATION FEES

Category	Early Bird Registration	Standard Registration
	On or Before 01/02/2020	After 01/02/2020
MDES Member (Membership No.: _____)	<input type="radio"/> RM 80	<input type="radio"/> RM 100
Non-Member	<input type="radio"/> RM 100	<input type="radio"/> RM 120

- a. The registration fee includes admission to all sessions, coffee breaks and lunch ONLY.
- b. Acceptance of registration is at sole discretion of the Organising Committee. Confirmation of registration will be provided in writing only after **receipt of full payment**.

C. PAYMENT DETAILS

ALL payment made payable to **MALAYSIAN DIABETES EDUCATORS SOCIETY**

Enclosed is my total payment of RM _____ to be made through: (tick appropriate box)

1. Cheque No.: _____ Cheque Issuing Bank: _____

2. Telegraphic Transfer

T.T Reference No.: _____ T.T From (Bank Name: _____)

* Important Note: Please scan your T.T slip and e-mail to the secretariat for verification

D. TERMS AND CONDITIONS

- All payments must be made in Ringgit Malaysia
- Payment by Cheque and Telegraphic Transfer is to be made to the following bank account
- Please note that all related bank charges and financial charges are to be borne by the delegates and are not to be deducted from the fees payable to the workshop.

Account Name : MALAYSIAN DIABETES EDUCATORS SOCIETY

Name of bank : CIMB Bank Berhad

Account No. : 8008256175

Address : CIMB Midvalley Kuala Lumpur

SWIFT code : CIBBMYKL

E. CONFIRMATION

- Registration will only be confirmed upon receipt of FULL PAYMENT.
- Upon receipt of the FULL PAYMENT, the 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 workshop.

F. CANCELLATION POLICY

- Cancellation of registration must be made in writing to the Secretariat. Refunds will only be made after the workshop.
- Cancellation received on or before 1st February 2020: 50% refund.
- Cancellation received after 1st February 2020: No refund.

** Paid registration fee is not refundable after the stipulated date for whatever reasons.*

Please forward the completed Registration Form to:

The Secretariat (Attention to Mr. Felix)

Malaysian Diabetes Educators Society (MDES)

H/p no.: +60 11-1616 9276

Email: fitmykch2020@gmail.com

I _____ I/C No: _____ hereby
have acknowledged, read, understood and agreed on the above terms and conditions.

Signature: _____

Date: _____