

# REGISTRATION FORM

17<sup>th</sup> Continuing Professional Development (CPD) Series:  
**"Diabetes Asia 2018" Conference**

July 26-29, 2018

**Borneo Convention Centre Kuching (BCCK), Kuching, Sarawak, MALAYSIA**

*Please tick '√' where applicable*

Specialist       General Practitioner       Medical Officer       Nurse       Dietitian  
 Medical Assistant       Pharmacist       Others: Please specify \_\_\_\_\_

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

Name: Prof/Dr/Mr/Mrs/Ms .....

Family Name/ Surname (If any): .....

Organisation: .....

Mailing Address: .....

.....

Postcode: ..... State: ..... Country: .....

Telephone (Off): ..... (M): .....

Fax: ..... E-mail: .....

Name to appear on conference certificate: .....

Name to appear on conference name tag: .....

Submit for a **FREE PAPER** presentation (oral / poster)\*

Submit for **PROFESSOR MUSTAFFA YOUNG INVESTIGATORS' AWARD\*\***

Meals: Normal  Vegetarian

\*Delete whichever is not applicable      \*\* Oral presentation only; please fill in the **Declaration Form**

## Conference Venue:

**Borneo Convention Centre Kuching (BCCK)  
The Isthmus, Sejingkat, 93050 Kuching  
Sarawak, MALAYSIA**

## Conference Fees

### Local Delegate

REGISTRATION	Conference Fee*	Total payable	Please tick
EARLY BIRD REGISTRATION (before May 31,2018)	RM 780	RM 780	
AFTER May 31, 2018	RM 880	RM 880	

\* Subsidised rates

### International Delegate

REGISTRATION		Please tick
EARLY BIRD REGISTRATION (before May 31,2018)	USD 500	
AFTER May 31, 2018	USD 600	

**NOTE: The 0% GST is only applicable from June 1, 2018. In order to avoid GST charges on 6%, it is advised that participants pay the registration fee without GST after June 1, 2018. Special discount is available for group booking and attendance to both DCOM and DAC 2018. Please check with the Secretariat. Thank you.**

### 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 Conference.
- A 90% refund can be made for cancellation received in writing or by fax at least 4 weeks before the Conference.
- A 50% refund will be given if cancellation is received 14 days before the Conference.

### Mode of Payment^^

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

(No. ....) of USD/RM .....

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

^ Crossed Cheque/Bank Draft/Money Order/Postal Order/Local Order should be made payable to the **National Diabetes Institute.**

^^ Please visit [eeurl.com/cR-x-X](http://eeurl.com/cR-x-X) on your internet browser for **ONLINE REGISTRATION & PAYMENT DETAILS.**

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

#### Secretariat Address:

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