

<u>The 11th Hong Kong Optometric Conference –</u> <u>"Advance Optometry Care 眼科視光護理進階"</u>

Ticket Order Form

Please return the form to : Mr Kevin Koo (Fax: (852) 2270 5806 / Email: kevin.wh.koo@hktdc.org) I would like to attend **The 11th Hong Kong Optometric Conference**

(Date: 7-8 November 2013 (Thursday - Friday) / Time: 8:30am - 12:45pm / Venue: Room N101, Hong Kong Convention & Exhibition Centre, 1 Expo Drive, Wan Chai, Hong Kong)

<u>Personal Details</u> : -				
□ Prof. □ Dr.	Mr. Mrs	5.	Miss	
Surname:	Given Name:			
Company Name:		Title:		
Address:				
Postal Code:	City:	Country:		
Tel:	Fax:	E-mail:		
Ticket Order Details: -				
Regular Rate:				
□ HKD\$600 (USD\$78) per ticket x	ticket(s) = TOTAL: HKD		(Two Days)	
\Box HKD\$480 (USD\$63) per ticket x	ticket(s) = TOTAL: HKD		(One Day)	
<u>Special Offer:</u> Early Bird (*on or before 30 September 201	.3)			
\Box HKD\$450 (USD\$58) per ticket x	ticket(s) = TOTAL: HKD		(Two Days)	
HKD\$360 (USD\$47) per ticket x (*based on the date of the postal chop) Group Ticket (for each order of 10 or more ticket)			(One Day)	
□ HKD\$450 (USD\$58) per ticket x	ticket(s) = TOTAL: HKD		(Two Days)	
□ HKD\$360 (USD\$47) per ticket x	ticket(s) = TOTAL: HKD		(One Day)	
Payment by Cheque: -				
Cheque Payable to "Hong Kong Trade Developm	nent Council "			
Name of Bank and Cheque no.:		Amount: *HKD / US	SD	
Payment by Credit Card: -				
Card No:		(🗆 Visa / 🗆 Master)		
Name of Cardholder:		(please use	e Block Letter)	
nount: *HKD / USD Card Expiry Date:				

Remarks

1. Orders without payment will not be entertained.

2. Acceptance to registration will be subject to space availability on a first-come-first-served basis.

3. Conference programme is subject to change without prior notice.

4. All tickets sold are non-refundable.

5. Persons under 18 will not be admitted.

Conference Organisers:







www.hktdc.com