

Calcium Function in Development, Health & Disease: Applications in Biotechnology

The Hong Kong University of Science & Technology

Hong Kong

November 29th – December 2nd, 2004



REGISTRATION FORM

Please complete this form and return it duly signed to the Conference Secretary (Fax, E-mail or Priority Mail)

REGISTRATION FORMS RECEIVED WITHOUT THE CORRESPONDING PAYMENT WILL NOT BE ACCEPTED.

A) Participant details

Family name: _____ First name: _____
Institution: _____
Address: _____
Zip code: _____ City: _____ Country: _____
Phone: _____ Fax: _____ E-mail: _____

B) Registration fees

	Before Sept 1 st , 2004	After Sept 1 st , 2004	Amount
Full registration (Non-students)	HKD2000	HKD2500	_____
Students*	HKD500	HKD1000	_____
Accompanying person**	HKD500	HKD1000	_____

*This registration form must be endorsed by the supervisor or head of Department to confirm student status (see section C below).

**Accompanying person is a spouse or family member, who will not present a paper

C) Student Identification*

I _____ (name of supervisor/Head of Department) do certify that
_____ (name of student) is a student in my lab/department.

Signature: _____

Date: _____

D) Payment

☐ Check or Money order (in HKD) to be made payable to: **The HKUST**
or

☐ Credit card:

☐ Visa Card #: _____ Expiry date: _____
☐ Master Card Card #: _____ Expiry date: _____

Name on the card: _____

Signature: _____ Date: _____

Conference secretary:

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