

Seminar on Medical Devices – “Safe use of Medical Equipment” – Enrolment Form
醫療儀器講座：醫療儀器的安全使用 - 報名表格

To 送呈: Medical Device Control Office, Department of Health 衛生署醫療儀器管制辦公室
Fax 傳真: (852) 3157 1286

I/We would like to enroll in the seminar of 26 February 2009:
本人/我們欲報名參加二〇〇九年二月二十六日講座:

Name 姓名	Position 職位

Organization 機構	
Contact Person 聯絡人	
Telephone 電話	
Fax 傳真	
E-mail Address 電郵地址	

Remarks: Attendance certificates will be awarded to attendees in electronic format only. They will be sent to the contact person's e-mail address after the seminar. The names as appeared in the attendance certificates will be the same as the names of applicants specified above

備注：參加者將獲發電子版本的「聽講證書」。此聽講證書在講座舉行後電郵至聯絡人的電郵地址。在聽講證書上的姓名將與以上所載參加者的姓名相同。

(For Official Reply Use Only)

Please bring this slip to the seminar for registration

No.

Dear Sir/Madam 執事先生：

Confirmation of Enrolment 報名確認信

- We have reserved for you: 已為（你們）預留了以下座位：
_____ seats in the seminar of 26.2.2009 at 14:30 – 17:30 在 26.2.2009(下午2時30分至5時30分)的講座中_____個座位。
- The seminar is full. You will be notified if there are similar seminars in the future.
講座已額滿。如再有同類的講座，將作另行通知。

Notes 備註:

- (1) No parking spaces will be provided. You are requested to use public transport services to the seminar venue.
本署不會向出席者提供車位。請使用公共交通工具前往講座會場。
- (2) If, on the date of the seminars, the Tropical Cyclone Signal No. 8 or above or the Rainstorm "BLACK" Warning is issued or still in effect at 12:00 noon, the seminars be automatically postponed and you will be notified of the revised schedule of the seminars once it is fixed.
如舉辦講座當天正午十二時天文台發出或仍然發出八號或更高熱帶氣旋警告信號或黑色暴雨警告，則講座會改期舉行，改期的詳情會另行通知。

Medical Device Control Office, Department of Health
衛生署醫療儀器管制辦公室

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