



Society of Sports and Exercise Medicine Malaysia (SSEMM)



☐ 3. Local Order (for Malaysians only) (LO Reference No:

4. Telegraphic Transfer (T.T. Reference No:

Date of Transaction: \_



Medicine Malaysia (SSEMM) Sports Medicine	10 20 March 2011	The Hoyale Orlaidif Ke	iaia Eurripui, Maiaysi
REGI	STRATION FOR	M	
PLEASE WRITE CLEARLY IN BLOCK LETTERS.			
Delegate Details			
Title: Prof Dr Mr Mrs Ms			
Full Name:	Designation:		
Affiliated Organisation/ Institution/ University:			
Address:			
		Country:	
Tel: ( ) Mobile: (	)		
E-mail:	/		
Please tick if you are a vegetarian			
Registration Fees			
Registration type	Before or on	After 31st December 2010	After
Tiogistiation type	31st December 2010	and before or on 5th March 201	
FIMS / SSEMM members for FIMS – ICSEM 2011	USD250 / RM850	USD300 / RM1,050	USD350 / RM1,225
(15" – 20" March 2011) - Member  Non – FIMS / SSEMM members for FIMS – ICSEM 2011	USD300 / RM1,050	USD350 / RM1,225	USD400 / RM1,400
(15th – 20th March 2011) - Non-member	0000007111111,000	0000007111111,220	000+007111111,400
FIMS / SSEMM members for Advanced Emergency Sports Medicine	USD600 / RM2,000	USD650 / RM2,275	USD700 / RM2,450
Course (15th & 16th March 2011)  Non - FIMS / SSEMM members for Advanced Emergency Sports	USD650 / RM2,275	USD700 / RM2,450	USD750 / RM2,625
Medicine Course (15th & 16th March 2011)			002700712,020
FIMS – SSEMM members for FIMS Team Physician Course	USD550 / RM1,800	USD600/ RM2,000	USD650 / RM2,275
(17th & 18th March 2011) Non FIMS – SSEMM members for FIMS Team Physician Course	USD600 / RM2,000	USD650 / RM2,275	USD700 / RM2,450
(17th & 18th March 2011)	,		,
Physiotherapist, nurses and paramedics		USD60 / RM200	
(15th - 20th March 2011) *Lunch not included Students of University and College		USD15 / RM50	
(15th - 20th March 2011) *Lunch not included			
General Public (15th - 20th March 2011) *Lunch not included		USD60 / RM200	
Payment  1. Credit Card  VISA Mastercard AN  I have authorised the SOCIETY OF SPORTS  RM from  Name of Card Holder:	AND EXERCISE MEI		
Card Number:	Fyi	piry Date (mm/yy):	
Card Issuing Bank:		F J Dato (IIIIII yy).	
CBC Code:			
* Visa/Master : The last three digits on the reverse side of * Amex : The four digit number on the left/right side of the			
Card Holder's Signature:	Da	ate (dd/mm/yy):	
2. Company Cheque (for Malaysians only)		0	
(Cheque Number:	Issuing Bank:		
Date of Transaction:	· ·		

T.T. Bank:







# **REGISTRATION FORM**

### **REGISTRATION GUIDELINES**

### **Payment**

MALAYSIA"

All payments will be charged in Ringgit Malaysia (RM). Payments can be made by credit card, telegraphic transfer, cheque and local order (for Malaysian only) or cash to "SOCIETY OF SPORTS AND EXERCISE MEDICINE

Account Name : SOCIETY OF SPORTS AND EXERCISE MEDICINE MALAYSIA

Account Number : 1253 - 0015443 - 05 - 1

SWIFT Code : CIBBMYKL

Bank Name : CIMB BANK

Bank Address : 23, JALAN MEMANDA 7 / 1, WISMA AMPANG TRIANGLE II,

JALAN AMPANG, 68000, AMPANG, SELANGOR, MALAYSIA.

Bank tel no: : 603 - 42701858

Bank fax no: : **603 - 42701776** 

### Confirmation

Confirmation of registration will be sent to all delegates upon receipt of FULL payment.

## **Cancellation Policy**

Cancellation of registration must be made in writing to the Congress Secretariat. Refund will only be made after the Congress.

Cancellation received on or before 15th January 2011: 100% refund (minus an admistration fee of RM200)

Cancellation received between 15th January 2011 and 15th February 2011: 50% refund

Cancellation received on or after 15th February 2011: No refund

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