

**截止報名日期**  
**Deadline for registration:**  
**31 Mar 2011**

For Secretariat Use Only 只供內部使用

Date Received: \_\_\_\_\_

Reg. No: \_\_\_\_\_

## The School Nurses International 16<sup>th</sup> Biennial Conference 2011 第十六屆國際駐校護士雙年度會議 2011

**"The Role of School Nurses: Evidence-based Practice, Globalization and Policy Formulation"**

**駐校護士的角色：推行循證實踐、迎接全球化挑戰、倡導政策制定**

25 – 29 July 2011, School of Nursing, The Hong Kong Polytechnic University, Hong Kong SAR, China

2011年7月25-29日於中國香港特別行政區香港理工大學護理學院舉行

### Registration Form 注册表格 (Only for Day Registration 只適用於单日注册)

Please complete the form in BLOCK letters. All conference delegates are required to complete this form individually on or before 31st Mar 2011. All fields marked with \* are mandatory for registration. A confirmation e-mail will be sent to you once related payment is confirmed and received.

請以正楷填寫本表。所有參與會議代表需獨立填寫本表格並須於 2011 年 3 月 31 日前提交注册。有\*的欄目為必須填寫欄。大會秘書處將會在完成有關過賬手續後向閣下之登記電郵發出電郵確認文件。

#### Conference Delegate 会议代表

\*Title 职称

Prof 教授  Dr 博士  Mr 先生  Mrs 太太  Ms 女士  Miss 小姐

Other 其他 (please specify 请注明): \_\_\_\_\_

\*First (Given) name 名

Middle name

\*Last (Family) name 姓

Chinese name (if any) 中文姓名

\*Name for badge 会议名牌名称

HKID/Passport no. 身份证/护照号码

Birthday(yy/mm/dd)

/ /

(for excursion insurance only 只作购买景点参观旅游保险用途)

出生日期

(年年/月月/日日)

\*Affiliation/Organization 机构

\*Position 职位

\*Postal address 邮寄地址

\*City 城市

State 州 / Prov. 省

\*Country 国家

Postal code (if any) 邮编

\*Phone (country-area-local) 电话

Fax 传真

\*E-mail 电邮

Abstract ref. no (if an abstract is submitted)

摘要参考号码(如已提交摘要)

\*Special dietary requirements 特别膳食要求: (please tick your choices 请勾选适用方格)

None 没有  Vegetarian 素食  No beef 不吃牛肉  No pork 不吃猪肉  No seafood 不吃海鲜

Other 其他 (please specify 请注明): \_\_\_\_\_

\*Conference Date attending 参与会议日期: (please tick your choices 请勾选适用方格)

Jul 26, 2011 (Tue)  Jul 27, 2011 (Wed)  Jul 28, 2011 (Thu)  Jul 29, 2011 (Fri)

Please refer to the conference website for daily conference schedule 請於大會網頁查閱有關个别日期之会议日程表

# \*Summary of Payment 缴款总结

## \*Registration fee 注册费用

(I) Local Delegate 本地代表

(A) Local Delegate 本港代表	Fee费用	**日数No. of	Total合计	Remarks备注
	HK\$	Days	HK\$	
Conference Fee会议费用	\$500	X		Inclusive of Lunch 费用包括午餐
Welcoming Dinner欢迎晚宴	\$300	X		Jul 25, 2011 Evening 25日晚上
Gathering Dinner联欢晚宴	\$300	X		Jul 27, 2011 Evening 27日晚上
Sightseeing Tour 半天市内观光	\$200	X		Jul 27, 2011 Afternoon 27日下午
Sub-total 总计(A)=				

(B) Local Student *** 学生	Fee费用	**日数No. of	Total合计	Remarks备注
	HK\$	Days	HK\$	
Conference Fee会议费用	\$250	X		Inclusive of Lunch 费用包括午餐
Welcoming Dinner欢迎晚宴	\$150	X		Jul 25, 2011 Evening 25日晚上
Gathering Dinner联欢晚宴	\$150	X		Jul 27, 2011 Evening 27日晚上
Sightseeing Tour 半天市内观光	\$100	X		Jul 27, 2011 Afternoon 27日下午
Sub-total 总计(B)=				

\*\*\*Limited quota for student participants: places offered on first-come first-served basis. Please e-mail or fax a copy of your student ID card to support your application to the Conference Secretariat at (852)2334 1124.

\*\*\*学生名额有限,先到先得。请将学生证副本电邮或传真致大会秘书处 (852)2334 1124, 以便确认学生身份

Conference Total Amount (HK\$):  
会议费用总计(港币): (A) or 或(B)=\$ \_\_\_\_\_

## \*Payment Method 付款方法 (please tick your choices 请勾选适用方格)

I agree to pay the above conference fees by cheque payable to "The Hong Kong Polytechnic University"  
本人同意以支票支付会议注册费用, 支票抬头为"香港理工大学"

Cheque No. 支票号码: \_\_\_\_\_ Bank Name 银行名称: \_\_\_\_\_

I agree to pay the above conference fees to "The Hong Kong Polytechnic University" by credit card. My credit card account details are as follows  
本人同意以信用卡支付会议注册费用予香港理工大学, 本人信用卡账户资料如下:

Type of credit card 信用卡类型:  VISA  MasterCard  CUP 银联卡

Card number 号码:

Expiry date 到期日:      
(m/m) (y/y)

Card holder's name: \_\_\_\_\_  
卡主姓名 (As appearing on card 印于卡上之姓名)

V-code V 码:    (last 3 digits located on the back of the card 信用卡背后之数字的最后 3 个位)

Total Amount Payable 应付费用: HK\$ \_\_\_\_\_

All payment must be made in Hong Kong dollars. For successful online credit card payment, a payment confirmation e-mail will be issued by the University's Finance Office as an official e-receipt. Please contact the Conference Secretariat if a paper receipt is required. Any cancellation or change must be received and confirmed by the Conference Secretariat in writing via letter, fax or e-mail before April 30, 2011 for a 70% refund of total payment. No refunds will be granted after this date or for no-shows. The refund will be processed one month after the conference, less the applicable taxes and bank handling charges. If credit card payment is unavailable in your area, please contact the Conference Secretariat for other possible payment methods.

所有缴款以港币结算。所有成功过账的网上信用卡缴款,将由大学财务处向登记电邮发出确认成功注册电子收据,如需硬拷贝收据,请与大会秘书处联络。如有更改或取消须于 2011 年 4 月 30 日前以信件、传真或电邮的书面方式送达大会秘书,如获大会确认取消可取回 70%之已缴款项,所有退款将会在会议结束后 1 个月开始进行,最终退款将需扣除相应的手续费和税项(如有)。如阁下所在地未能进行信用卡缴款安排,可联络大会秘书以便进行其他付款安排。

### Friendly reminder on travel insurance 旅游保险的温馨提示

When delegates register for the Conference, neither the Organizing Committee nor the Conference Secretariat assumes any liability whatsoever. Participants are requested to make their own arrangements relating to health and travel insurance. 请各会议参加者注意,会议筹备委员会及大会秘书处将不会为会议参加者承担任何责任保险,故请各会议参加者自行购买健康及旅游保险。

Personal data collected will be used for conference registration and promotion purposes only. If you have any queries about our privacy policy and practices, please send them to the HK PolyU webmaster at [paadmin@internet.polyu.edu.hk](mailto:paadmin@internet.polyu.edu.hk)

收集个人资料声明:本表格所有收集之个人资料,只作会议注册及日后会议的推广用途。如对本大学的私隐政策及执行有任何查询,请电邮至 [paadmin@internet.polyu.edu.hk](mailto:paadmin@internet.polyu.edu.hk)

The SNI 16<sup>th</sup> Biennial Conference 2011  
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<http://sn.polyu.edu.hk/whocc/sni2011conf/>

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\*By submitting this form, I accept the release and waiver of liability policies, as well as the policies with regard to cancellations and registration fee refunds. 当我提交本表格时,代表我已同意和接受大会在取消及退款上的政策安排,并同时豁免大会在会议政策上的相关责任。

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Date 日期

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Delegate's Signature

参加者签署