



**New Territories East Cluster
Simulation & Training Centre (NTEC-STC)**

新界東聯網模擬及訓練中心



**Advanced and Difficult Airway Management Workshop for Doctors (ADAM-D)
for HA Staff 2018-19**

Registration Form

Particulars of applicant:

Name (English) : _____ Name (Chinese): _____

_____ (Rank) / _____ (Ward / Department) / _____ (Hospital)

Specialty : _____ Experience (No. of Years): _____

Phone (Mobile) : _____ (Office): _____

HA email address : _____

Other email address: _____

Car Plate (If you want reserve parking place on that day, \$60 per day): _____

Please indicate your priority by using “1” to “2”:

| Date | Venue | Time | Priority |
|-------------|--|---------------|----------|
| 28 Apr 2018 | New Territories East Simulation & Training Centre (NTEC-STC), 3E, North District Hospital, 9 Po Kin Road, Sheung Shui, N.T | 08:30 – 13:00 | |
| 24 Nov 2018 | | | |

Please return the completed form to Ms. Lois Chiu via email clm031@ha.org.hk, fax (852) 2683 8342 or by post to:

New Territories East Simulation and Training Centre
3E Ward, North District Hospital, 9 Po Kin Road, Sheung Shui, NT.
Attn.: Ms. Lois Chiu

Notes:

- 1) Registration will be based on a first-come-first-served basis and successful applicants will be noticed via email before **5 weeks** of course commencement.
- 2) For successful applicant, please inform us at least **4 weeks** in advance prior to the course commencement if you are unable to attend the course by written email to clm031@ha.org.hk.

Signature: _____

Date: _____

For enquiries, please contact Ms. Lois Chiu at (852) 2683 8302