

eHealth Forum cum eHealth Consortium Annual Dinner Reservation Form

Organization Details				
Or	ganization Name:	Nature:		
Со	ontact Person (Primary)			
Na	ame:	Title:		
		Contact No.:		
Contact Person (Secondary)				
Na	ame:	Title:		
Εn	nail:	Contact No.:		
Table Reservation				
 Supporting Organization (HK\$7,200) & Seat for President / Chairman at Head Table (HK\$600 per Seat) One Dinner Table of 12 Seats + One Seat @ Head Table, Total: \$7,800 				
 Supporting Organization (HK\$3,600) & Seat for President / Chairman at Head Table (HK\$600 per Seat) HALF Dinner Table (6 Seats) + One Seat @ Head Table, Total: \$4,200 				
	Supporting Organization (HK\$1,800) & Seat for President / Chairman at Head Table (HK\$600 per Seat) - 1/4 Dinner Table (3 Seats) + One Seat @ Head Table, Total: \$2,400			
Remark Seat for President / Chairman at Head Table				
-	Name: Ti	itle:		
Payment Methods				
□ Direct Transfer to the eHealth Consortium Limited Bank Account: - Beneficiary Bank: Bank of Communications Co., Ltd. Hong Kong Branch - Swift Code: COMMHKHH - Beneficiary: eHealth Consortium Limited - A/C No.: 027-559-0-202098-9 Please mail the original bank pay-in-slip together with this form to the eHealth Consortium Limited.				
Ple	neque No:	alth Consortium Limited" and mail together with this form		



Remarks:

- 1. Please send the form to the Secretariat of eHealth Consortium via Email (info@ehealth.org.hk) on or before 30th December 2016. No cancellation will be accepted after submission of form. Seats are limited. First Come First Served.
- 2. Payment should also be settled on or before 30th December 2016.
- 3. For enquiry, please contact the Secretariat (Phone: 3488 3762 / Email: info@ehealth.org.hk)

Authorized Signature with Company Chop	Date