



# 14<sup>th</sup> BANGKOK INTERNATIONAL SYMPOSIUM ON HIV MEDICINE

## 19 - 21 JANUARY 2011

Queen Sirikit National Convention Centre, Bangkok, Thailand.

### REGISTRATION FORM

#### DELEGATES INFORMATION

##### Delegates Details

Name : \_\_\_\_\_

Job Title: \_\_\_\_\_

Email : \_\_\_\_\_

Mobile: \_\_\_\_\_

##### Organization Details

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

#### REGISTRATION INFORMATION

1. Registration forms will not be accepted if bank payment slip or cheque is not attached.
2. Registration is confirmed when we send a written registration confirmation which will normally be sent by email.
3. Written notification of course cancellations must be received at least 7 working days before the course start date
4. A fee of 20% of full course payment will be deducted from the refund in the case of course cancellations
5. Any bank charges and/or additional expenses incurred as a result of bounced cheques shall be borne by the delegates

##### For registration, please contact:

Jeerakan Janhom or Natthapa Pitayanon  
HIV-NAT, The Thai Red Cross AIDS Research Centre  
104 Ratchadumri Road, Pathumwan,  
Bangkok 10330, Thailand  
Phone: + 662 652 3040  
Fax: + 662 254 7574  
Email: Jeerakan.j@hivnat.org, natthapa.p@hivnat.org  
Program and online registration are available at [www.hivnat.org](http://www.hivnat.org)

#### REGISTRATION INFORMATION

##### Regular delegate

Earlybird rate THB7,500/USD260

Standard rate THB10,000/USD350

##### Student/Youth delegate

Earlybird rate THB3,500/USD130

Standard rate THB6,000/USD200

##### Note:

- 1) Earlybird rate is before 30 November 2010
- 2) Standard late is after 30 November 2010
- 3) The registration fee includes a full set of conference documentation, and lunch

#### METHOD OF PAYMENT

##### Telegraphic Transfer

Please transfer to:

A/C name: Bangkok Symposium on HIV Medicine

A/C number: 045-2-61225-9

Bank name: The Siam Commercial Bank Public Company Limited, Sapha-kachat Thai Branch

Swift Code: SICOTHBK

Address: 1873 Henry Dunant Rd., Pathumwan, Bangkok 10330 Thailand

You will receive a payment notification after we get your confirmation of participation

##### Cheque OR Bank Draft

#### BILLING INFORMATION

(please notify if not same delegate information)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tel/Fax: \_\_\_\_\_

##### For Secretariat Use

Registration Number: \_\_\_\_\_

Date received: \_\_\_\_\_

Amount: \_\_\_\_\_