



5TH BIENNIAL SCIENTIFIC MEETING 2016
MALAYSIAN ASSOCIATION for the STUDY of PAIN

THEME: PAIN MANAGEMENT - WHY FOCUS ON PRIMARY CARE?

DATE: 10TH TO 12TH MARCH 2016 | VENUE: SWAN CONVENTION CENTRE, SUNWAY MEDICAL CENTRE

Registration Form

Please complete the following registration form. Make sure to include ALL contact information (email address, mailing address, telephone & fax number) to ensure receipt of your Registration Confirmation email. All registration MUST be accompanied with proof of payment. Registration without proof of payments will not be processed.

A. PERSONAL DETAILS

Title : Prof. / Dr. / Datuk / Dato' / Datin / Mr / Mdm / Ms Name On Badge : _____
 (Limited To 15 Letters Only)
 Full Name as per NRIC/Passport : _____
 NRIC / Passport Number : _____
 Institution / Hospital : _____
 Correspondence Address : _____
 City : _____ Postcode : _____ Country : _____ Letter for Visa Application : Y / N
 Fax : _____ Mobile Number : _____ Email : _____
 Profession : Pain Specialist Family Medicine Specialist Specialist (Please state: _____)
 Medical Officers General Practitioners Clinical Psychologist Physiotherapist
 Physiotherapist Occupational Therapist Pharmacist Nurses
 Dietary Requirement: Vegetarian Non-Vegetarian

B. INSTITUTION / COMPANY SPONSOR DETAILS

**If you are registering for yourself, please go to part C.*

Contact Person's Name : _____ Mobile Number : _____
 Institution / Company Name : _____ Office Number : _____
 Email : _____ **Institution / Company Sponsor details are compulsory if you are a sponsor and would like to be kept updated on registration.*

C. REGISTRATION FEES

Please tick the relevant box.

	Malaysian		Malaysian		Overseas	
	MASP Member		Non MASP Member		Non MASP Member	
Current Registration Fees	Allied Health	Doctor	Allied Health	Doctor	Allied Health	Doctor
Pre-Congress Workshop	<input type="checkbox"/> RM 50	<input type="checkbox"/> RM 150	<input type="checkbox"/> RM 120	<input type="checkbox"/> RM 200	<input type="checkbox"/> USD 40 / RM 160	<input type="checkbox"/> USD 50 / RM 180
Before 31 st Jan 2016	<input type="checkbox"/> RM 450	<input type="checkbox"/> RM 600	<input type="checkbox"/> RM 500	<input type="checkbox"/> RM 700	<input type="checkbox"/> USD 180 / RM 720	<input type="checkbox"/> USD 250 / RM 990
1 st Feb to 28 th Feb 2016	<input type="checkbox"/> RM 500	<input type="checkbox"/> RM 700	<input type="checkbox"/> RM 550	<input type="checkbox"/> RM 800	<input type="checkbox"/> USD 220 / RM 880	<input type="checkbox"/> USD 300 / RM 1170
1 st Mar to 12 th Mar 2016	<input type="checkbox"/> RM 550	<input type="checkbox"/> RM 800	<input type="checkbox"/> RM 600	<input type="checkbox"/> RM 900	<input type="checkbox"/> USD 250 / RM 1000	<input type="checkbox"/> USD 350 / RM 1350

Please select the workshop you prefer if you have register for the Pre-Congress Workshop:

Advanced Acute Pain Workshop for Nurses Ultrasound Guided Pain Blocks
 Guidelines on Opioid Prescribing for Chronic Non-Cancer Pain Psychology Workshop Psychosocial Assessment and Management of Chronic Pain

Terms and Conditions

- If your membership detail is not filled in or is no longer current, your registration will automatically be processed as a Non-MASM Member.
- If you wish to check your status for membership, please contact MASP secretariat at +603 2242 0902 or email to maspconferencesecretariat@gmail.com.

D. PAYMENT

Payment Mode : Online / Telegraphic Transfer Letter of Guarantee Local Purchase Order (LPO)
 Bank-in Cash / Cheque (No: _____)

All payments are to be issued in favour of "Malaysian Association for the Study of Pain".

Bank Name CIMB Berhad
 Account No 8001286457
 Bank Address Lot 5270, Bangunan Pentadbiran Baru, University Malaya, Lembah Pantai, 50603 Kuala Lumpur, Malaysia.
 Swift Code CIBBMYKL

Cancellation and Refund Policy

The secretariat must be notified in writing of all cancellations. Refund will be made only after the conference and only applicable under following circumstances.

- Cancellation on or before 28th February 2016: 95% Refund.**
- Cancellation after 1st March 2016: No Refund.**

If no refund is required but a change in participant registration is needed, then the Secretariat must be informed in writing via email to maspconferencesecretariat@gmail.com.

Secretariat

For further information, please contact:-
MALAYSIAN ASSOCIATION for the STUDY of PAIN
 c/o Bloom Communications
 P1-2-1, Andalucia, Pantai HillPark, Jalan Pantai Permai, Bangsar South,
 59200 Kuala Lumpur, Malaysia.
 Tel: +603 2242 0902 Fax: +603 6207 6795
 Email: maspconferencesecretariat@gmail.com
 Website: www.masp.org.my