

# Certificate Course in Psychopharmacology

Co-organised by  
Institute of Brain Medicine & Philippines Psychiatric Association

## Registration Form

### Personal Details

Name Dr / Mr / Mrs / Ms

Surname

Given name

Position / Appointment

Hospital / Home / Office Address

  

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Country

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Telephone

Fax. No.

Mobile

Email

### Course Venue

Location: Asian Institute of Management, Paseo De Roxas, Makati City, Manila, Philippines  
Website: <http://www.aim.edu/>

### Course Fee

Two and a half day course

( Including 3 lunches and welcome dinner )

Early Bird Registration (On or before 31 st May, 2012)	Normal Registration (After 1 st June, 2012)
\$1,000 US	\$1,200 US

### Payment Methods

#### 1. Cheque

Please issue the cheque payable to **"Institute of Brain Medicine Limited"**  
and post to our Institute of Brain Medicine office address (See below).

**OR**

#### 2. Bank Transfer

Please transfer the course fee to the following bank account,

**IBM Bank Account Name:** Institute of Brain Medicine Limited

**IBM Bank Account No.:** Hong Kong and Shanghai Banking Corporation 004-168-852960-001 (USD Savings)

**SWIFT CODE:** HSBCHKHCHK

### Note that:

- Course availability is on a first come first serve basis.
- Applicants should submit the completed application form together with the cheque or bank receipt to the Institute of Brain Medicine Office in Hong Kong, **no later than 25<sup>th</sup> June, 2012.**
- Confirmation of Course Registration** - A letter will be sent to you by e-mail / by mail upon confirmation.
- Hotels** - Course fee does not include hotel accommodation.
- Cancellation Policy**  
Emailed:
  - Cancellations received up and including 1<sup>st</sup> June : **90% will be refunded**
  - Cancellations between 2<sup>nd</sup> June and 9<sup>th</sup> July : **50% will be refunded**
  - Cancellations after 10<sup>th</sup> July : **No refund will be made**
- For any enquiries, please contact our secretariat officer Ms Vivien Lau :**

**Institute of Brain Medicine office address :** 1406 Crawford House, 70 Queen's Road, Central, H.K.

**Email:** [vivien@ibrainmedicine.org](mailto:vivien@ibrainmedicine.org)

**Website:** [www.ibrainmedicine.org](http://www.ibrainmedicine.org)

**Tel:** + 852 2333 9881

**Mobile:** + 852 9080 6318

Signature

Date