

MINISTRY OF NATIONAL GUARD HEALTH AFFAIRS KING SAUD BIN ABDULAZIZ UNIVERSITY FOR HEALTH SCIENCES – JEDDAH DEANSHIP OF POSTGRADUATE EDUCATION



REGISTRATION FORM

2nd MERGENCY MEDICINE REVIEW COURSE **EMRC COURSE**

17 – 20 AUGUST 2015

Please fill the form clearly & completely and RETURN this form through Emails mentioned below. Name Submitted in this form is Considered CORRECT and READY for FINAL PRINTING of CERTIFICATE.

Gender:	[] Male	[] Female	
Name: First			
Middle			
Last (Family)			
Saudi Council #:			
Hospital/Instit	ution:		
Department:			
Specialty:		Position:	
Mobile #:		Telephone #:	
Email Address	:		

PAYMENT PROCESSES:

IN CASH:

Go directly and pay to Ms. Almera Ramos Accountant 2nd Floor Deanship building

KSAUHS-J-Contact: 84-45043

Note: there is no confirmation done

in cash payments.

PAYMENT PROCESSES:

ON LINE:

PLEASE EMAIL YOUR FILLED OUT REGISTRATION FORM TO THE CONTACT BELOW (*) AND WAIT FOR THE IBAN NUMBERS TO BE SENT TO YOUR REGISTERED EMAIL. PLEASE WAIT FOR THE CONFIRMATION OF YOUR

REGISTRATION AFTER THE PAYMENT VERIFICATIONS. THE **CONFIRMATION WILL BE**

SENT TO YOUR REGISTERED EMAILS.

REGISTRATION FEES:

Dates	Fee
Early Registration up to 9 th July, 2015	2500 SR
Late Registration after 9 th July , 2015	3000 SR

Course Registration Policies

- Postponement or re-booking made due to emergency medical circumstances will be subjected to Course Convener's approval. Fifty (50%) percent of the course fee will be paid 2.
- Postponement due to negligence or related work responsibilities will not be considered and therefore no refund will be granted to the requesting candidate. Cancellation requires a minimum of 3 weeks' notice. Cancellation made less than 3 weeks is not permitted and course fees will be forfeited / will not be refunded.
- Failure to attend the entire course duration is considered cancelled or "no show" and therefore course fees will not be considered for refund.
- No complete of attendance for the whole duration of the course, means "no" issuance of the certificate/s.
- The registration is with limited seats; first come first serve basis will be the guideline Please be advised for 'On-Line' method of payments to directly deposit your payments preferably to Arab National Bank and send your payment receipt together with your filled out registration form to the email below

I have read and agreed to the terms and conditions.

Signature & Date:

Course information/booking form: *Mr. Abdulrahman Al Qahtani Administrative Assistant Direct Line # 012-224-5011 Inside Hospital: 84-45011 Email: alqahtania19@ngha.med.sa

* Ms. Dareen A. Kousah Administrative Assistant Direct Line # 012-224-5014 Inside Hospital: 84-45014 Email: kousahda@NGHA.MED.SA

* Ms. Maha AL Jizani PTC Coordinator Direct Line # 012-224-5015 Inside Hospital: 84-45015 Email: JizaniMa@ngha.med.sa