

2ND SAUDI EPIDEMIOLOGY CONFERENCE

GLOBALIZATION IMPACT ON PUBLIC HEALTH

REGISTRATION FORM

Please fill up the form clearly, legibly and completely.
Your NAME will appear on your 'Course Certificate' exactly as written on this form.

RECEIPT NO.

COURSE NAME: _____ DATE: _____

First Name : (Dr./Mr/Ms/Mrs) _____

Middle Name : _____

Last Name : _____ SCFH Professional no. _____

Professional Title : _____ Badge no.: _____

Specialty : _____ Nationality : _____

Complete Mailing Address : (Your complete mailing address is necessary to us for future collaboration)

Institution : _____

Department : _____ Mail Code : _____

P.O. Box : _____ City : _____

Postal Code : _____ Country : _____

Contact Numbers (Please include telephone area codes if applicable)

Telephone : _____ Pager : _____

Mobile Phone : _____ Fax Number : _____

Email Address : _____

Important Notice on Method of Payment

Arab National Bank

Account number or IBAN: to be announced, Coordinators will contact the registrants once it is available

BANK & ATM TRANSFER ONLY, CASH PAYMENT NOT ACCEPTED

NOTE: Fax a copy of your transaction / receipt to +966-11- 4295480

CANCELLATION POLICY

1. If cancelled **four(4) weeks prior** to course schedule, no admin. charge imposed.
2. If cancelled **within the four (4) week period but within two (2) weeks prior** to course schedule, admin. charge of 20% of course fees.
3. If cancelled **within 1 week prior** to course schedule, admin. charge of 100% of course fees.

TRANSFER POLICY

1. If transferred **one (1) week prior** to course schedule & course transferred to has the same amount of fees, no admin. charge imposed.
2. If transferred **one (1) week prior** to course schedule & course transferred to has higher amount of course fees, no admin. charge and excess or difference of course fees should be paid.
3. No Transfer allowed **within one (1) week** from the course schedule unless approved by NGCEBM Director, Co-/Course Director.

I have read the terms and conditions regarding the cancellation, transfer and refund policy stated in this form

SIGNATURE