



ISCMC-2002

*The Third International Symposium
for Chinese Medicinal Chemists*

Registration Form

28-31 December 2002

The Hong Kong University
of Science and Technology
Hong Kong SAR, China



Please complete and return to:
Symposium Secretariat
ISCMC-2002
c/o Prof. Wei-Min Dai
Department of Chemistry
HKUST, Clear Water Bay, Kowloon
Hong Kong SAR, China

Tel: +852-2358-7365
Fax: +852-2358-1594
E-mail: iscmc@ust.hk
Website: <http://ihome.ust.hk/~chdai/ISCMC2002/program.htm>

***The early registration deadline is 31 July 2002.
Deadline for abstract submission is 30 June 2002.***

Personal Details:

Title: Prof. Dr. Mr. Ms. Miss (double click the box and tick the default value checked box)

Family Name: _____ First Name: _____ [Chinese Name: _____]

Institution/Organization: _____

Address: (postal preferred) _____

Tel: _____ Fax: _____ E-mail: _____

Check the box(es) If you are presenting an abstract If you need an invitation letter
(double click the box and tick the default value checked box)

A. Registration Fees (double click the box below and tick the default value checked box) (1 US\$ ≈ 7.8 HK\$)

Full Registration Fee: **HK\$2,000** HK\$ _____
(include welcome reception, morning and afternoon teas, meals, banquet, and abstract book)

Full Registration Fee with lunches only: **HK\$1,600** HK\$ _____
for local participants if preferred
(include welcome reception, morning and afternoon teas, lunches, and abstract book)

Student Registration Fee:* **HK\$1,000** HK\$ _____
(include welcome reception, morning and afternoon teas, meals, banquet, and abstract book)

Student Registration Fee without meals:* **HK\$500** HK\$ _____
for local students if preferred
(include welcome reception, morning and afternoon teas, and abstract book)

Accompany Person Registration Fee: **HK\$500** HK\$ _____
(include welcome reception, morning and afternoon teas, meals, and banquet)

Family Name: _____ First Name: _____ [Chinese Name: _____]

Daily Registration Fee with lunch only: **HK\$500** HK\$ _____
(include one day morning and afternoon teas, lunch, and abstract book)

Day of attending: Sunday Monday Tuesday

This is TOTAL A:

HK\$ _____

**Students must provide a letter from their supervisors confirming their status*

B. Accommodation Fees (double click the box below and tick the default value checked box)

Date of arrival: _____ Date of departure: _____

No. of nights: _____

Visitor Center in Tower II

- Single room in Visitor Center# HK\$440/night HK\$ _____
 Twin room in Visitor Center (good for two persons)# HK\$560/night/room HK\$ _____
 Suite in Visitor Center (for couples/families)# HK\$680/night/room HK\$ _____

Limited number of rooms available; Room will be assigned on the first-come-first-served basis.

Serviced Apartments in University Center, Tower C

- Large single room in Apartment HK\$440/night HK\$ _____
 Small single room in Apartment HK\$300/night HK\$ _____
 Shared large room in Apartment* HK\$300/night HK\$ _____
 Shared large room in Apartment using extra bed* HK\$140/night HK\$ _____

*Sharing large room in Apartment with: _____ or Assigned by organizer

Student Halls

- Twin-bed room (maximum for two persons) HK\$160/night/person HK\$ _____

Sharing with: _____ or Assigned by organizer

- Triple room (maximum for three persons) HK\$110/night/person HK\$ _____

Sharing with: _____ and _____ or Assigned by organizer

This is TOTAL B: HK\$ _____

Note: All rates quoted above may be subject to a slightly annual adjustment.

Accommodation must be reserved before the early registration deadline (31 July 2002).

Accommodation fees MUST be paid on submitting the Registration Form. Reservation submitted after 31 July 2002 is not guaranteed. Cancellation of accommodation before 28 Nov 2002 in writing will receive a refund less one night room charge. No refund will be made after 28 Nov 2002.

Payment (Payments must be made in HK dollars)

A. Registration Fee	HK\$ _____
B. Accommodation Fee	HK\$ _____
C. Late Fee at 10% of the early registration fee after 31 July 2002	HK\$ _____
TOTAL PAYMENT DUE	HK\$ _____

(double click the box below and tick the default value checked box)

- Check or Bank Draft (*please make payable to The Hong Kong University of Science and Technology*)

Name of Drawer: _____

Please send the check/bank draft together with this registration form/abstract to the Symposium Secretariat.

OR (double click the box below and tick the default value checked box)

- Visa Mastercard

Card number: _____ Name of Cardholder: _____

Card expiry date: _____ Signature: _____ Date: _____

**A confirmation letter and accommodation information will be sent to you.
WE SUGGEST YOU KEEP A PHOTOCOPY OF YOUR COMPLETED FORM.**