

MENOPAUSE DUBAI

“POST CONFERENCE WORKSHOPS”

Oct 14, 2017 | 9am-5pm

LIFECARE HC
Matloob building, Sheikh Zayed Rd.
Dubai

Name: _____

Please print your name here EXACTLY as it should appear on your certificate.

Specialty: _____

Academic Title: _____

License: HAAD MOH DHA Others: _____

Name of Clinic/Practice: _____

City/Country: _____

Mobile number: _____

Email: _____

• How did you know about our course?

Internet Friends Others, Specify: _____

• Special Dietary requirements?

None Vegetarian Others: _____

Admission requirements:

1. Completely filled-in registration form
2. Valid passport copy or Emirates I.D. copy.
3. Medical / Aesthetician Licensed copy (Front & Back).
4. Copy or scan of payment receipt or wire transfer receipt.



Registration fees

Included:

1. Scientific sessions and workshops with hands-on training
2. Coffee breaks & meal during the course
3. Products, materials & disposables used at workshops
4. Black and white printed lecture notes & Certificate

		US DOLLARS
Oct 14	• Workshop	3000

Methods of Payment:

(Registration is confirmed only upon submission of proof of payment)

Wire Transfer* or Money Exchange to the Organizer:

Account Name: LIFE CARE HEALTH CONSULTANCY FZCO
EMIRATES ISLAMIC BANK
Account No. 3707571857001
Swift Code: MEBLAEADXXX
IBAN: AE140340003707571857001

*Bank transfer charges on sender.

Cancellation policy:

No refund of course fees for cancellations
The organizer reserves the right to cancel or alter the content and timing of the programme or the identity of speakers
Late registration will not be entertained

*This course is a public event and photography is being taken to document lectures and workshops. If you have any objections, please inform the event coordinator to arrange a seat for you in a blind area to the camera.

DECLARATION:

I hereby read and understood the eligibility criteria, registration and payment terms. I have enclosed all details needed for my admission.

Name: _____

Signature: _____

Date: _____

Registration form to be sent by email info.lifecare@thk.ae or fax +971 4 3808666.