

# 5th JAPAN-ASEAN Conference on Men's Health & Aging

PRE-CONFERENCE WORKSHOP ON 8 July 2010

July 9-11 2010 KOTA KINABALU, MALAYSIA

## PARTICIPANT DETAILS

Title (Mr/Mrs/Ms/Dr) \_\_\_\_\_ Registration ID \_\_\_\_\_ (If you have registered)  
First Name \_\_\_\_\_ Family Name \_\_\_\_\_  
Position \_\_\_\_\_  
Organization \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Postcode \_\_\_\_\_ Country \_\_\_\_\_  
Phone (+ ) \_\_\_\_\_ Fax(+ ) \_\_\_\_\_  
Mobile(+ ) \_\_\_\_\_ E-mail \_\_\_\_\_

## REGISTRATION FEE

Pre-Conference Workshop  MYR 50 per participant

## PAYMENT METHODS

### BANK IN / BANK TRANSFER

All payment must be made to "AOS CONVENTIONS & EVENTS SDN BHD (JAC)" in MYR

Bank Name : Alliance Bank Malaysia Berhad

Bank Address : Ground Floor, Wisma MCA 163, Jalan Ampang, 50450 Kuala Lumpur, Malaysia

Account Number : 62216-0-01-000062-9

### IMPORTANT:

- Please include a copy of your bank in slip/bank transfer slip with your form. Bank draft and cheque will not be accepted for payment. AOSCE is not responsible for payments not sent as stated above.
- Bank charges to be borne by payee

### LIABILITY

Personal travel insurance is strongly recommended, as AOSCE act as agents only in securing hotels, transport and travel services and shall not be liable for acts or defaults in case of injury, damage, loss, accident, delay or irregularity of any kind whatsoever during arrangement organized through contractors or the employees of such contractors in carrying out services. Hotel and transportation services are subject to the terms and conditions under which they are offered to the public in general. The Organising Committee reserves the right to make changes where deemed necessary, without prior notice to parties concerned. All disputes are subject to the Malaysian law. We kindly ask you to authorize us by your signature to use all registration data given in this form for computerized handling of the conference.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For enquiries, please contact us at: [menshealth2010@aosconventions.com](mailto:menshealth2010@aosconventions.com)

Please return this form to the Conference Secretariat:

**Email:** [menshealth2010@aosconventions.com](mailto:menshealth2010@aosconventions.com)

**Phone:** +603 4252 9100 | **Fax:** +603 4257 1133 | **Website :** [www.japanaseanmenshealth2010.com](http://www.japanaseanmenshealth2010.com)

Remember to keep a copy of this form for your own record.