



香港急症科醫學院
**HONG KONG COLLEGE OF
 EMERGENCY MEDICINE**

SPONSORSHIP TO:

Emirates Society of Emergency Medicine Scientific Conference 2014 (ESEM)

5th to 9th December 2014, Dubai, United Arab Emirates

The College invites application for the above sponsorship from Fellows and Ordinary Members. You can refer to the website of <http://www.esem2014.com/registration> for details. Please note that the deadline for early bird registration of the conference is on 15th November 2014.

Details of the Sponsorship:

- 1) Quota: **10 Fellows / Ordinary Members**
- 2) Sponsorship amount: **100% Early Bird Rate of registration fee of your appropriate category**
- 3) CMECPD and Training Points: - 12 passive CMECPD points for participating Fellows
- 10 Category B TP for participating Trainees
- 4) Deadline for application: **13th November 2014 (Thursday)**
- 5) Application method: by fax at 2554-2913 or by e-mail to Ms. June WU, Executive Secretary at emadm@hkcem.org.hk with the personal particulars.
- 6) A selection process will be conducted if the quota is exceeded. Priority will be given to those with paper / poster presentation at this Congress.
- 7) Successful candidates will be reimbursed **100% early bird registration Fee for the main conference of your appropriate category** upon submission of the *original receipt and certified true copy of the attendance certificate* to our Executive Secretary on or before **9th January 2015 (Friday)**.
- 8) Documents for reimbursement will not be accepted after the deadline for reimbursement unless there is prior approval from the Council.
- 9) No double sponsorship is allowed.
- 10) The final decision of sponsorship rests with the College Council.
- 11) Successful candidates who fail to attend will not be considered for any College sponsorship for 2 years from the closing date of the event.

From: Dr. Ludwig TSOI, Hon. Secretary, HKCEM
 7th November 2014

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 To Dr. Ludwig TSOI (c/o Ms. Cherry KWOK / Ms. June WU)
 Hon. Secretary, HKCEM

Deadline for application: **13th Nov2014**
 Fax: **2554-2913**

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I would like to apply for sponsorship of the above conference. I understand the conditions for application.

Name:	<input type="checkbox"/> Fellow <input type="checkbox"/> Ordinary Member
Post:	Hospital:
E-mail:	Contact No.:
Signature:	Date: