



# MALAYSIAN THORACIC SOCIETY ANNUAL CONGRESS 2014

12<sup>th</sup> - 15<sup>th</sup> June 2014 | Holiday Inn, Melaka, Malaysia

## REGISTRATION FORM

(Photocopies of this form are acceptable)

Congress Secretariat

### MTS Annual Congress 2014

G-1 Medical Academies of Malaysia  
210 Jalan Tun Razak, 50400 Kuala Lumpur, Malaysia  
Fax : (603) 4023 8100

Name \_\_\_\_\_

Name on badge  (limited to 15 letters)

Address \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Facsimile \_\_\_\_\_ Email \_\_\_\_\_

Specialty \_\_\_\_\_

### REGISTRATION

Category	On or Before 15 <sup>th</sup> April 2014	From 16 <sup>th</sup> April 2014 to 8 <sup>th</sup> June 2014	On-Site	Amount
MTS Member (Ordinary/Affiliate) / Medical Student	RM 500	RM 600	RM 800	
Others	RM 600	RM 700	RM 900	
Single-Day Registration (Date: .....) (Medical Student and Allied Health Professional)	RM 200		RM 300	
Accompanying Person (Gala Dinner only)	RM 80			

Congress Workshops (12 <sup>th</sup> June 2014, Thursday)	Congress Registrant	Non-Registrant
<input type="checkbox"/> 1. Emergency Thoracic & Lung Ultra Sonography (E-TLUS)	RM 100	RM 200
<input type="checkbox"/> 2. Respiratory Imaging	-	RM 50
<input type="checkbox"/> 3. Inhalers: How To Choose, How To Use?	-	RM 50
<input type="checkbox"/> 4. Smoking Cessation	-	RM 50
<input type="checkbox"/> 5. Pulmonary Rehabilitation	-	RM 50

Melaka Tour (Optional) (12 <sup>th</sup> June 2014, Thursday)	No. of Pax
Congress Delegate @ RM 30 per person <input type="checkbox"/> 0900 – 1200 <input type="checkbox"/> 1400 – 1700	
Accompanying Person @ RM 60 per person <input type="checkbox"/> 0900 – 1200 <input type="checkbox"/> 1400 – 1700	

**TOTAL**

For online registration and payments, please log on to [www.mts.org.my](http://www.mts.org.my)

### PAYMENT

All payments by cheques should be issued in favour of “Malaysian Thoracic Society”

Payments can be made via telegraphic transfer to the following account :

Account Name : Malaysian Thoracic Society                      Address of Bank : Jalan Ipoh Branch, Kuala Lumpur  
Account Number : 873-1-0420229-5                              Swift Code : SCBLMYKXXXX  
Name of Bank : Standard Chartered Bank Berhad

(Please return the remittance advice note along with this form either by fax or mail. Document image by email is also acceptable.)

Date \_\_\_\_\_

Signature \_\_\_\_\_