



救世軍



香港理工大學



伊利沙伯醫院



CADENZA Community Project:

Health-social Partnership Transitional Care Model for Post-discharged Elderly Seminar 流金頌社區計劃—長者安心樂回家 研討會

Registration Form 登記表

Please be informed that the following representative(s) from our agency will attend the captioned event on 6th July, 2010.

本機構會有以下人士出席：

	Name 姓名	Post 職位
1.		
2.		
3.		
4.		
5.		

Signature 簽名: _____

Name in Block Letter 姓名: _____

Post 職位: _____

Agency Name 機構名稱: _____

Contact Tel. No. 聯絡電話: _____

Fax No. 傳真號碼: _____

Email Address 電郵地址: _____

Date 日期: _____

Please complete the registration form and return it to **CADENZA Community Project: Health-social Partnership Transitional Care Model for Post-discharged Elderly** via e-mail or fax.

請填妥表格並以傳真或電郵方式交至 **流金頌社區計劃—長者安心樂回家**

Fax 傳真 : 2782-6645

Email 電郵 : ccphsptcm@ssd.salvation.org.hk

Deadline 截止日期 : 25th June, 2010 (Friday)

Enquiry 查詢 : Tel: 2782-1334

Remarks 備註

- Registration would proceed **only upon receipt of the completed registration form, no telephone reservation provided.**
報名不設電話登記。
- Applicants will be informed for confirmation via e-mail or fax. 主辦單位在申請者報名後，以電郵或傳真通知出席詳情。
- If the Typhoon Signal no.8 or above, or the Black Rainstorm Warning Signal is hoisted within two hours of commencement of the seminar (2:15p.m.), the session concerned will be cancelled. 若天文台在研討會開始時間(下午 2:15)之兩小時前懸掛 8 號或以上颱風訊號或黑色暴雨警告，該日活動將會取消。