



Sponsorship on
Scientific Symposium on Emergency Medicine
20 October 2017 | Hong Kong Academy of Medicine

The Hong Kong Emergency Nurses Association (HKENA) would like to invite all interested ordinary members to apply for sponsorship on **Scientific Symposium on Emergency Medicine** that will be held in Hong Kong Academy of Medicine on 20 October 2017. You may refer to the website on <http://www.ssem.hk> for the information and registration details.

Details of the sponsorship:

- 1 Obligations and responsibilities attendant to successful sponsorship:
 - 1.1 Write up a post-conference report in the HKENA newsletter or
 - 1.2 Share the conference activities in HKENA seminar if being invited or
 - 1.3 Acknowledge HKENA as a source of funding in the presentation.
- 2 Applicant must be an ordinary member who is a paid up ordinary member on or before **22 September 2017**.
- 3 Full registration fee sponsor to applicant who is first author of successfully accepted for poster presentation or oral presentation by the organizing committee.
- 4 Half sponsorship of full registration fee for each ordinary member.
- 5 Double sponsorship from other organizations will render the application ineligible.
- 6 A selection process will be conducted if the quota is exceeded.
- 7 Final decision of selection rests with the HKENA council.
- 8 Deadline for application is on or before **22 September 2017**.
- 9 Application method: post to HKENA "**P.O. Box 70122, Kowloon Central Post Office, Hong Kong**" with the personal particulars be filled in the below form.
- 10 For applicants with accepted presentation(s), please also provide the presentation topic(s) & abstract(s).
- 11 Documents for reimbursement are subjected to the presentation of original receipts and certified true copy of attendance certificate.

Yours faithfully,

Mr. LEUNG Chun Pong, President of Hong Kong Emergency Nurses Association

28 August 2017



To: **Hong Kong Emergency Nurses Association**

Re: **Application for sponsorship to attend Scientific Symposium on Emergency Medicine**

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

Name	
Membership number	
Department & Hospital	
Contact phone number & Email	
Signature	