

Form I: Application for Sponsorship for Conference Purpose

Please email the completed form to HKCASH: hkcash@llink.com.hk

I. I would like to apply for sponsorship from the Hong Kong Society of Congenital & Structural Heart Disease to enable me to attend the conference with details as follows.

II.	Personal Particulars	
	Name	
	Office Address	
	Office Telephone/Mobile	
	Fax	
	Email	
	Membership Status	Honorary Fellow/ Member/ Associate Member*
	No. of Previous Sponsorship from	Current Year
	HKCASH:	Last Year
II	I. Conference Details	
	Title of Conference/Course	
	Duration with Dates	
		Arrival earlier than one day before and /or departure later than one day after the conference (please tick as appropriate) No Yes Reason: (** Sponsorship will usually not be granted unless there is a special reason AND prior approval is obtained.)
	Venue, City, Country	
	Sponsorship Amount Requested (estimated)	
	Role in Conference	Invited Speaker/ Official Delegate/ Invited Chairman/ Organizer/ Present Abstract/ Audience* Other (to specify)
	Reasons for Attendance	Other (to specify)
I	V. I agree to submit a report on attend to Hong Kong.	lance of the Conference within one month from my return
	Signature	Date

* Delete whichever not applicable.



Hong Kong Society of Congenital & Structural Heart Disease

Form II: Report of Attendance of Conference

I.	Personal Particulars	
	Name	
	Office Address	
	Office Telephone/ Mobile	
	Fax	
	Email	
	Membership Status	Honorary Fellow/ Member/ Associate Member*
II.	Conference Details	
	Title of Conference/Course	
	Duration with Dates	
	Venue, City, Country	
	Organizer	
	No. of Delegates	
III.	Report of Professional Interest (Please use additional sheet if required	1.)
IV.	Request for reimbursement has been the Society.	submitted/is attached herewith/will be submitted* to
	Signature	Date

* Delete whichever not applicable.



Form III: Request for Reimbursement of Expenses for Conference Purpose

I. I would like to request for reimbursement of expenses for the following conference which I attended under the sponsorship of the Hong Kong Society of Congenital & Structural Heart Disease.

II.	Personal Particulars	
	Name	
	Office Address	
	Office Telephone/ Mobile	
	Fax	
	Email	
III.	Conference Details	
	Title of Conference/Course	

Duration with Dates
Venue, City, Country

IV. Financial Statement

	Item	Amount (HKD), please specify if not in HKD
1.	Registration Fee	
2.	Air ticket	
3.	Hotel Accommodation	
4.	Local Transportation	
	Total	



V. Bank Account Details

To facilitate the payment process, please provide below bank information for the payment.

Name of Bank	
Name of Account Holder	
Account No.	

- **VI.** Report of the Conference for the Hong Kong Society of Congenital & Structural Heart Disease had been submitted/is attached* herewith.
- **VII.** I confirm that all the above statements are correct to the best of my knowledge.

Signature Date

* Delete whichever not applicable.

N.B.: Reimbursement will not be considered unless satisfactory report is received by the Society.