



# 62<sup>nd</sup> Annual Scientific Conference

4<sup>th</sup> – 7<sup>th</sup> September, 2020 | The Shangri-La Fijian Resort

## REGISTRATION FORM

First Name	
Surname (Family) Name	
EDP #	Email:
Current Work Address	
Gender: F or M	Mobile: Work:
FMA Member: Yes or No	Polo Shirt Size: S / M / L / XL / 2XL / 3XL / 4XL
Diet Specifications: (Please give details)	Vegetarian/Non Vege / Gluten Free
Payment Method:	Please specify ( EFTPOS/Cash or Direct Deposit)
FMA Conference Bank Account Details	Acc Name: Fiji Medical Association Bank: BSP Acc Name: 82858372 Narration: Full Name as stated on this form

- **FMA regret to advise that meals for spouse and kids is not covered in the conference package.**

