

## Academic & Training Affairs Registration Form

Event's Title :

**Taking Pharmaceutical Care Practice to the Next Level:**

Overcoming Challenges, Optimizing Outcomes and Shaping the Future  
(25-27 October 2016 G – 24-26 Muharram 1438 H)

Department :

**Pharmaceutical Care Division**

Please fill the form in **BLOCK LETTERS**

First Name:

Middle Name:

Last Name:

Workplace:

Title:

Pharmacist/Resident/  
Physician/Nurse

Specialization:

Saudi Council License #:

(Required for Local Attendee)

Address:

P.O. Box, City &  
Postal Code:

e-mail :

**Telephones and Fax:**

Area Code:

Office Tel. No:

Ext:  
(If any)

Mobile:

Fax :

Ext :  
(If any)

### REGISTRATION

	KFSH&RC staff	non-KFSH&RC staff	Workshop
Physicians	500	600	100
Pharmacist	400	500	100
Pharmacy Assistants / Nurses	300	400	100
Students	250	250	100

**NOTE:** One (1) week after the event, please check that your name is listed in the Saudi Commission for Health Specialties website to make sure your CME has been registered. If not found, please contact us.

When registering for a workshop, please indicate which workshop:

Workshop	Select
Session 1 (maximum 1 in this session)	
Antimicrobial Stewardship	<input type="checkbox"/>
Pharmacokinetics	<input type="checkbox"/>
Session 2 (maximum 1 in this session)	
Pharmacoeconomics	<input type="checkbox"/>
Anticoagulation	<input type="checkbox"/>

### Payment instruction:

Payment to cashier in the main hospital building is preferred.

Bank transfer method can otherwise be used with the following details:

Al-Rajhi Bank, Al-Khaladia Branch, Jeddah, Kingdom of Saudi Arabia

Bank Account No: IBAN: **SA6280000627608010300492**

FOR INTERNATIONAL PAYMENT YOU HAVE TO ADD RAJHI BANK **SWIFT CODE: RJHISARI**

Payment receipt must include specifically the Pharmacy Conference title.

**Copy of bank receipt must be faxed or emailed IMMEDIATELY after payment.**

### IMPORTANT INFORMATION:

- Registration **is not confirmed** until payment is received.
- On-site payment is only accepted in cash.
- Cancellation/Refund Policy: Request for refund must be received one month prior to the Conference. Administrative fee of SR 50 will be deducted from all refunds.
- For applicants from outside the Kingdom of Saudi Arabia, please complete the Visa Bio Data Information Sheet. Visas will not be processed until we receive full payment of the registration fee & completed form.

**For registration and further information, please contact:**

#### Organizing Department:

Pharmaceutical Care Division

Mr. Reneesh Francis / Mr. Sahir Al-Amri

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#### CME Office:

King Faisal Specialist Hospital & Research Center (Gen. Org.)

–Jeddah Branch (MBC J-36), P.O. Box 40047, Jeddah 21499

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