PHARMACEUTICAL SOCIETY OF JAMAICA

Theme: "The Changing Face of Pharmacy"

REGISTRATION FORM

ANNUAL RETREAT
June 19 – 21, 2009
Sunset Jamaica Grande Hotel,
Ochio Rios

Conference Secretariat
41 Lady Musgrave Road
Kingston 5
Phone: (876) 978-4103/4199
Fax: (876) 978-7280
Email: psja@anbell.net URL:www.psj.org.jm

Please PRINT Clearly – Illegible or Incomplete Forms Will Not Be Processed

Title Mr[ ] Mrs[ ] Ms[ ] Other[ ]

Surname ______________________________\

First name ____\

Organization/Affiliation ____\

Mailing Address ____\

Contact Information Phone_________________________\ Fax_____________________\

Email____\

PLEASE WRITE LEGIBLE

REGISTRATION DETAILS

Early Bird
$1,500.00 (Members)
$2.500.00 (Non Members)
$ 1,500.00 (Pharmacy Students/Technicians) with ID

After May 20
$2,500.00 (Members)
$3,000.00 (Non Members)

ALL DELEGATES ARE REQUIRED TO REGISTER (Registration includes coffee break only)

CONTINUING EDUCATION

Members (Per Day)	Non Members (Per Day)	After May 20
$2,000.00(Members	$2,500.00	$2,500.00 (Members) $3,000.00 (Non Members)

PAYMENT DETAILS

By Cash /Certified cheque or lodge to RBTT, Liguanea Branch, A/C # 0501310006299 and fax lodgment slip to 978-7280

REGISTRATION J$ _____

CE J$ _____

TOTAL J$_____

Signature_____ Date_____

CANCELLATION AND REFUND POLICIES FOR REGISTRATION (NON-NEGOTIABLE). All cancellations must be received in writing/fax by the Secretariat before June 5, 2009. NO REFUNDS WILL BE MADE AFTER JUNE 8TH. 20% Penalty for all cancellations.