

*26 years of promoting
quality nursing education and practice*

26th



Anniversary Symposium

AGM

Date : April 14, 2012 (Saturday)

Venue : Assembly Hall, 4/F North Tower, YMCA,
41 Salisbury Road, Tsim Sha Tsui, Hong Kong

Programme :

17:00	AGM		
17:15	Registration & Tea Reception		
17:30	Symposium		
	Topic:	Clinical Outcomes and Advanced Nursing Practice	
	Keynote Speaker:	<i>Claudia LAI, Professor, School of Nursing, PolyU, Hong Kong</i>	
	Plenary Session	<i>Su Fee LIM, Advanced Practice Nurse, Singapore</i> <i>Siok Bee TAN, Advanced Practice Nurse, Singapore</i> <i>Hoi Chu TO, Nurse Consultant, Urology Nursing, QEH, Hong Kong</i> <i>Wai Kuen LEE, Nurse Consultant, Wound Care, QMH, Hong Kong</i>	
20:00	Dinner		
Fee:		Symposium plus Dinner	Symposium Only
	Member	HK\$350 per person	HK\$100 per person
	Non-member	HK\$450 per person	HK\$250 per person
	Full-time student	HK\$200 per person	HK\$50 per person
Award:	Attendance certificate with CNE Point: 2 point		

Reservation:

Please complete and return the reply slip together with a crossed cheque payable to “**Hong Kong Society for Nursing Education Limited.**” to P.O. Box 98898, Tsim Sha Tsui Post Office, Kowloon, Hong Kong. Confirmation will be made by phone or email.

Enquiry: Miss Windy HO at (M) 61865719 / (E-mail) windy.holaifung@connect.polyu.edu.hk or
Miss Melody CHAN at (M) 61444764 (E-mail) melodychan88@hotmail.com

*All are welcome. Please reserve your seat by **26 March 2012***

Reply Slip

HKSNE, 26th Anniversary Scientific Meeting & AGM

I _____ (Member / Non-member / Full-time student) would like to register a seat for the (Symposium / Symposium plus Annual Dinner*) (and attend AGM*) on 14th April 2012. A crossed cheque is enclosed.

Cheque No: _____ Bank: _____ Amount HK\$ _____

Workplace: _____ Contact Tel.: _____ Fax: _____ Email _____

Signature: _____ Date: _____

* delete as appropriate