Seminar on Bobath Concept and Conductive Education (Course code: CE-18A-01)

Rundown

Keynote Speaker: Ms Vardit Kindler

Bobath and Conductive Education: Individualized Programme versus Whole Day Management

Adjunct Speaker: Ms Ho Shun May, Angela, Physiotherapist from Jockey Club Conductive Learning Centre, SAHK

Petö Concept: the Cultivation of Positive and Persevering Personality in SAHK

Ms Vardit Kindler
Senior Bobath Tutor
Assistive Technology Consultant
Director, Department of Occupational Therapy, The Dvora Agmon Preschool Development Centre, Israel

Date
13 Jul 2018 (Fri)

Time
15:30-18:30

Venue
Theatre, 7/F, HK Federation of Youth Groups Building, North Point (Quarry Bay MTR Exit C)

Target
Therapists, Teachers, Child Care Workers, Psychologists, Nurses, Social Workers, Administrators

Accreditations:
CPD-PT: 3 points; CPD-OT: 3 points, CPD-SW: 3 points

Registration Fee
Standard: $300; Early Bird: $200 (deadline: 30 June 2018)
SAHK
Institute of Rehabilitation Practice
Tel: (852) 2778 6191 Fax: 3188 5700

Course Enrolment Form

PERSONAL INFORMATION

Name: 
Mr/Ms/Dr/Mrs* (Surname) (First Name)

Occupation: Organization:

Contact number: (mobile) (office)

Correspondence Address:

Email Address (1): Email Address (2):

COURSE TO ENROL IN

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Course Code</th>
<th>Registration Fee</th>
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<tbody>
<tr>
<td>Seminar on Bobath Concept and Conductive Education</td>
<td>CE-18A-01</td>
<td>□ HK$200 (Early Bird)</td>
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<td>□ HK$300 (Standard)</td>
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<tr>
<td>5-day workshop on “An introduction to intervention in young children with Cerebral Palsy based on the Bobath Concept”</td>
<td>CA-18A-03</td>
<td>□ HK$8,300 (Early Bird)</td>
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<td>□ HK$9,000 (Standard)</td>
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<td>□ HK$9,200 (Standard)*</td>
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*Early Bird Deadline: 30 June 2018*

PAYMENT

Payment should be in HK or US dollars and made payable to “SAHK”.

Bank name: ____________________________

Cheque / money order / bank draft* number: ____________________________

*Delete as appropriate

I, the applicant, understand that the information provided on this form will be used by the SAHK Institute for course enrolment and administration purposes, and: (please ‘✓’)

☐ I agree to the Institute keeping my personal data and wish to receive other course information from the Institute.

☐ I agree to the Institute keeping my personal data but do not wish to receive other course information from the Institute.

☐ I request to delete my personal data after completion of the course (Please note that the Institute cannot process your application for re-issuing of certificate, receipt, checking of CE points etc. after deletion).

Applicant’s Signature: ____________________________ Date: ____________________________

Application Method:

To register, complete and return this form together with cheque, money order or bank draft to:

SAHK Institute of Rehabilitation Practice
17/F, 21 Pak Fuk Road, North Point, Hong Kong SAR

Please mark “Course Application” on the envelope and put down the “applicant’s name” and “course name” on the back of the cheque, money order or bank draft.

Note:

1. Each enrolment form may only be used to apply for one course. Application to different courses must submit separate application with separate cheques, money orders or bank drafts.
2. Please fill out the required information in block letters and check the accuracy before mailing.
3. Course fees are non-refundable and non-transferable.
4. Refund will only be arranged upon course cancellation by the organizer.
5. Receipt acknowledgements and application results will be sent by e-mail.
6. For any enquiries, please contact us at (852) 2778 6191 or e-mail us at: irp@sahk1963.org.hk