

## REGISTRATION FORM

**To: Hong Kong Venture Capital and Private Equity Association Ltd**  
 Room 2001, Wilson House, 19 – 27 Wyndham Street, Central, Hong Kong  
 Tel: (852) 2167 7518 | Fax: (852) 2167 7530 | Email: [hkvca@hkvca.com.hk](mailto:hkvca@hkvca.com.hk)

Event: HKVCA Healthcare and Biotech Seminar  
 Date: 30 November, 2018 (Fri)  
 Time: 12:30 – 14:30  
 Venue: Deloitte Office, 35/F One Pacific Place, Admiralty, HK

### Registration Details

Name (Mr. / Ms.): \_\_\_\_\_ Position: \_\_\_\_\_  
 Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

### Contact Person

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

### Nature of Business

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Accounting Services | <input type="checkbox"/> Banking Services                           | <input type="checkbox"/> Data/Research                     | <input type="checkbox"/> Deal Sourcing   |
| <input type="checkbox"/> Financial Advisory  | <input type="checkbox"/> Fund Admin                                 | <input type="checkbox"/> Human Resources                   | <input type="checkbox"/> Insurance       |
| <input type="checkbox"/> IT                  | <input type="checkbox"/> Legal Services                             | <input type="checkbox"/> Media/PR                          | <input type="checkbox"/> Placement Agent |
| <input type="checkbox"/> General Partner     | <input type="checkbox"/> Limited Partner<br>(Please specify: _____) | <input type="checkbox"/> Others<br>(Please specify: _____) |  |

### Registration Fee\*

Corporate Full Member	Corporate Associate/Overseas (Full/Asso) Member	Non Member
<input type="checkbox"/> One free pass per company	<input type="checkbox"/> HK\$200 per person x _____	<input type="checkbox"/> HK\$400 per person x _____
<input type="checkbox"/> HK\$200 per person x _____		

\*Fee inclusive of a light lunch

Total Amount: HK\$ \_\_\_\_\_

### Payment

- Our check payable to the “Hong Kong Venture Capital and Private Equity Association Ltd” or “HKVCPEA Ltd”
- Our payment slip of remittance (net of any bank charges) to the following bank account:  
 Bank: The Hong Kong and Shanghai Banking Corporation Limited, Hong Kong, Head Office  
 Account name: **Hong Kong Venture Capital And Private Equity Association Ltd**  
 Account no.: **567-614755-001** (Swift code: HSBCHKHKKH)  
**Please provide a payment slip for our records. All bank charges should be pre-paid.**
- PayPal (You will receive an invoice from PayPal. Please follow the payment instructions in the email.)

### Notes

1. Registration must be followed by payment to secure your place.
2. Registration will be confirmed upon receipt of payment.
3. Should you require an invoice, please contact us.
4. Cancellation must be made in writing at least 7 working days prior to the event. No refund will be made thereafter.
5. Information in this form is subject to change. The HKVCA retains the right to make changes as it deems necessary.
6. Priority will be given to HKVCA Members.
7. No shows will be charged.
8. Seats are limited at first-come-first-served basis.
9. An additional charge may apply to accommodate special dietary requests.