



**2007 November Workshop (3/11) by CACBT Ex-co
New Frontiers in Cognitive Behaviour Therapy
Enrolment Form**

Title*	Given Name*	Surname*	Chinese Name

Position held: _____ Organisation: _____

Postal address: _____

Phone* (Home/Office): _____ Fax : _____

E-mail* : _____ Mobile: _____

Enrolment details (Please tick as appropriate):*

- | | | |
|----------------------------------|----------------------------------|----------------------------------|
| CACBT Member | Non-member | Full-time student+ |
| <input type="checkbox"/> HK\$400 | <input type="checkbox"/> HK\$600 | <input type="checkbox"/> HK\$400 |

* Must fill in the blanks

+ Please attach copy of Student photo ID

Please complete the enrolment form and return it with a crossed cheque payable to
“**Chinese Association of Cognitive Behaviour Therapy (HK) Limited**” or
“中國認知行為治療學會(香港)有限公司” to:

The Secretariat
Chinese Association of Cognitive Behaviour Therapy
Suite 1221, Bank of America Tower
12 Harcourt Road, Central
HONG KONG
(Re: CACBT 2007 November Workshop)

Total Payment Enclosed: Cheque No. _____ HK\$ _____

Deadline of enrolment: 27th October, 2007

Remarks:

- CACBT reserves the right to modify the programme and reject an enrolment at any point in time.
- Enrolment will be confirmed ONLY when full payment has been received by the CACBT. Confirmation will be sent by email or fax at least one week prior to the workshop.
- Official receipt will be issued at the registration counter. All fees are non-refundable.
- In case of over-subscription, priority will be given to CACBT members.
- If the Typhoon Signal no. 8 or above, or the Black Rainstorm Warning Signal is hoisted, the workshop will be cancelled. Details of postponement will be announced later.
- For enquiry, please send your email to info@cacbt.org or visit our website at www.cacbt.org