

THE HONG KONG INSTITUTE OF EDUCATION
Third Forum for Presidents of Normal Universities in the Greater China Region
9 October 2014
<http://www.ied.edu.hk/pforum>

Guest Information

Thank you for participating in the **Third Forum for Presidents of Normal Universities in the Greater China Region**. To enable us to make arrangements for your visit, please fill in and return this information form to Ms Karen Cheung of the Forum Secretariat **on or before 24 August 2014** (Fax: +852-2948-8965 or email: pforum@ied.edu.hk).

Please tick as appropriate *Please delete as inappropriate

Institution			
A. Invited Guest			
1. Personal Particulars			
Title	Prof/Dr/Miss/Mrs/Ms/Mr *		
Name			
Post			
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Welcome Dinner on 8 October 2014	<input type="checkbox"/> I shall attend	<input type="checkbox"/> I shall not attend	
Dietary Requirements	<input type="checkbox"/> Nil	<input type="checkbox"/> Vegetarian	<input type="checkbox"/> Halal <input type="checkbox"/> No beef
	<input type="checkbox"/> Others (please specify)		
Religious Needs	<input type="checkbox"/> Nil <input type="checkbox"/> Yes (please specify, e.g. prayer room):		
Arrival Date	(Flight No: _____)		
Departure Date	(Flight No: _____)		
2. Accommodation			
1. Our Institute provides a free standard hotel room for each invited university from 8 to 10 October 2014 (2 nights, including breakfast for 1 person). The hotel is located at a distance of 20-minute drive from our Tai Po Campus. Please indicate your preference on accommodation (subject to the hotel's availability):			
A. Type of Room:		<input type="checkbox"/> Double-bed Room	<input type="checkbox"/> Twin-bed Room
B. Other Requirements:		<input type="checkbox"/> Smoking Floor	<input type="checkbox"/> Non-smoking Floor
2. If you want to extend your stay, a concession rate has been arranged for participants. Please tell us your request and we would co-ordinate with the hotel. The daily rate is HK\$ 1,150 (including breakfast for 1 person and 10% service charges) and you have to settle the payment with the hotel when you check-in.			
Extended period of stay: from _____ to _____			

3. Other Requirements <i>(Please specify)</i>

B. Accompanying Participant <i>(if applicable)</i>

1. Personal Particulars <i>(Please use separate form for each participant)</i>

Title	Prof/Dr/Miss/Mrs/Ms/Mr *
Name	
Post	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Attendance <small>(please indicate the event(s) you would attend)</small>	<input type="checkbox"/> Welcome Dinner on 8 October 2014 <input type="checkbox"/> Forum <input type="checkbox"/> Lunch
Dietary Requirements	<input type="checkbox"/> Nil <input type="checkbox"/> Vegetarian <input type="checkbox"/> Halal <input type="checkbox"/> No beef <input type="checkbox"/> Others <i>(please specify)</i>
Religious Needs	<input type="checkbox"/> Nil <input type="checkbox"/> Yes <i>(please specify, e.g. prayer room):</i>

2. Accommodation

<input type="checkbox"/> 1. The above named participant is going to share the room with the invited guest: <input type="checkbox"/> An additional breakfast is required (HK\$100 for each day, please settle the payment with the hotel at check-in) <input type="checkbox"/> Additional breakfast is not required Or <input type="checkbox"/> 2. The above named participant requires an additional standard bedroom (HK\$1,150 per day, including breakfast for 1 person and 10% service charges). Please indicate the period of stay and settle the payment with the hotel when you check-in: Additional Room Required <i>(subject to the hotel's availability)</i> Type of Room: <input type="checkbox"/> Double-bed Room <input type="checkbox"/> Twin-bed Room Other Requirements: <input type="checkbox"/> Smoking Floor <input type="checkbox"/> Non-smoking Floor Period of Stay: from _____ to _____
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C. Contact Person

Please provide information of a contact person, if applicable.	
Name:	Post:
Tel. No.:	Fax No.:
Email:	

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