

Registration Form

April 25-27, 2012 Renaissance Shanghai Pudong Hotel

Complete the CPSA Shanghai registration form and send to the CPSA office by postal mail (if paying by check), fax, or email along with your payment. This form can be completed on your computer. Form may be signed electronically, otherwise form must be signed by hand.

our Information				
☐ Mr. ☐ Mrs. ☐ Ms.				
	First Name	Middle Inital	Last Name	
Institution/Company				
Address				
City	State/Province	Postal Code	Country	
E-mail Address		Telephone		
onference Registration				
Check appropriate registration category bel No refunds will be granted after March, 30,		Dollars. Full payment is due	upon registration.	
	Prior to January 22	January 22 - April 6	After April 6	
Full Symposium Registration	\$180	\$225	\$300	
Student / Postdoctoral Registration	\$80	\$100	\$150	
Workshop Registration (indicate selection below)	\$70	\$85	\$95	
Registration Total \$				
orkshop Selections (Wednesday, April 25	, 2012 9:30 am - 4:00 pm)		
DMPK Workshop	Bioanalytical Workshop	Pharm	Pharmaceutical Sciences Workshop	
ayment Options				
Check included (Check must be drawn on U.S. bank; Make check payable to Milestone Development Services)			Local attendees may contact Frank Fung to register	
Wire Transfer (Contact the CPSA office at info@cpsa-shan wire transfer instructions)	ghai.com for	如有问题,请联络上海货 Mr. Frank Fung	如有问题,请联络上海逸星商务咨询有限公司。 Mr. Frank Fung	
Credit Card (AmEx, MasterCard, VISA only) (Complete credit card information below)		冯军豪先生 Tel 电话: 86-21-39152015 Ext. 801		
CREDIT CARD NUMBER	DIT CARD NUMBER EXP DATE		Fax 传真: 86-21-39152015 Ext. 803 Cell 手机: 86-18917509848 / 86-13817660578 Email 邮箱: frank.fung@mice-partners.com	
NAME ON CARD		Email 邮相: frank.fung	wmice-partners.com	
SIGNATURE OF CARD HOLDER				

The completed registration form should be sent to the CPSA office by email (info@milestonedevelopment.com), fax (+1 267-757-0463), or mailed to Dr. Mike Lee, Attn: CPSA Shanghai, P.O. Box 178, Newtown, PA 18940-0178, USA.