

REGISTRATION FORM

Cayman Islands National Healthcare Conference
November 11-13, 2010

Healthcare 20/20



MINISTRY OF
HEALTH, ENVIRONMENT,
YOUTH, SPORTS & CULTURE
CAYMAN ISLANDS GOVERNMENT

To reserve a place at the conference please return this registration form by email, standard mail or fax it to:

Barbara Musson
Cayman Islands Health Services Authority, P.O. Box 915, Grand Cayman KY1-1103, Cayman Islands
Fax: (345) 949-2998 Email: Barbara.musson@hsa.ky

Company/Organisation:

Name:

Name:

Name:

Name:

Name:

Address:

Telephone:

Fax:

Email:

Please tick which day(s) you would like to attend:

Thursday November 11 5.30pm – 9.00pm

Friday November 12 1.00pm – 6pm

Saturday November 13 8.00am – 4.00pm

CME required

Please see conference website at www.healthcareconference.ky for full agenda details.

Please reserve a place for the above delegate(s) at the conference on 11-13 November 2010.