**Reply Slip**

Doctors/Dentists

To: Drug Office, Department of Health

Please return by

**28 Feb 2021 (extended)**

(Email: ka\_yan\_lai@dh.gov.hk or Fax: 3904 1224)

**Virtual Seminar on Regulation of Advanced Therapy Products in Hong Kong**

I would like to attend the virtual seminar. My order of preference is as follows:

|  |  |
| --- | --- |
| **Order of Preference**“1” (most preferred) or“2” (least preferred)# | **Seminar Session** |
|   | 2 March 2021 (Tuesday) 10:00 am – 11:00 am |
|   | 10 March 2021 (Wednesday)2:00 pm – 3:00 pm |

|  |
| --- |
| Participant:(Name) (Doctor / Dentist\* [\*Please delete as appropriate]) |
| Telephone No.:  |
| Email (Please write in **BLOCK LETTERS**): |
| Remarks (if any): |

# Due to limitation of the ZOOM capacity, if we cannot reserve a place for your most preferred session, we may allocate you to the next available session according to your order of preference.