

ASIA PACIFIC NEUROCRITICAL CARE CONFERENCE 2024

28-30 JUNE 2024, FRIDAY – SUNDAY
BORNEO CONVENTION CENTRE, KUCHING SARAWAK, MALAYSIA

STRENGTH THROUGH DIVERSITY

REGISTRATION GUIDE

JOINTLY ORGANISED BY



IN COLLABORATION WITH



IN PARTNERSHIP WITH



SUPPORTED BY

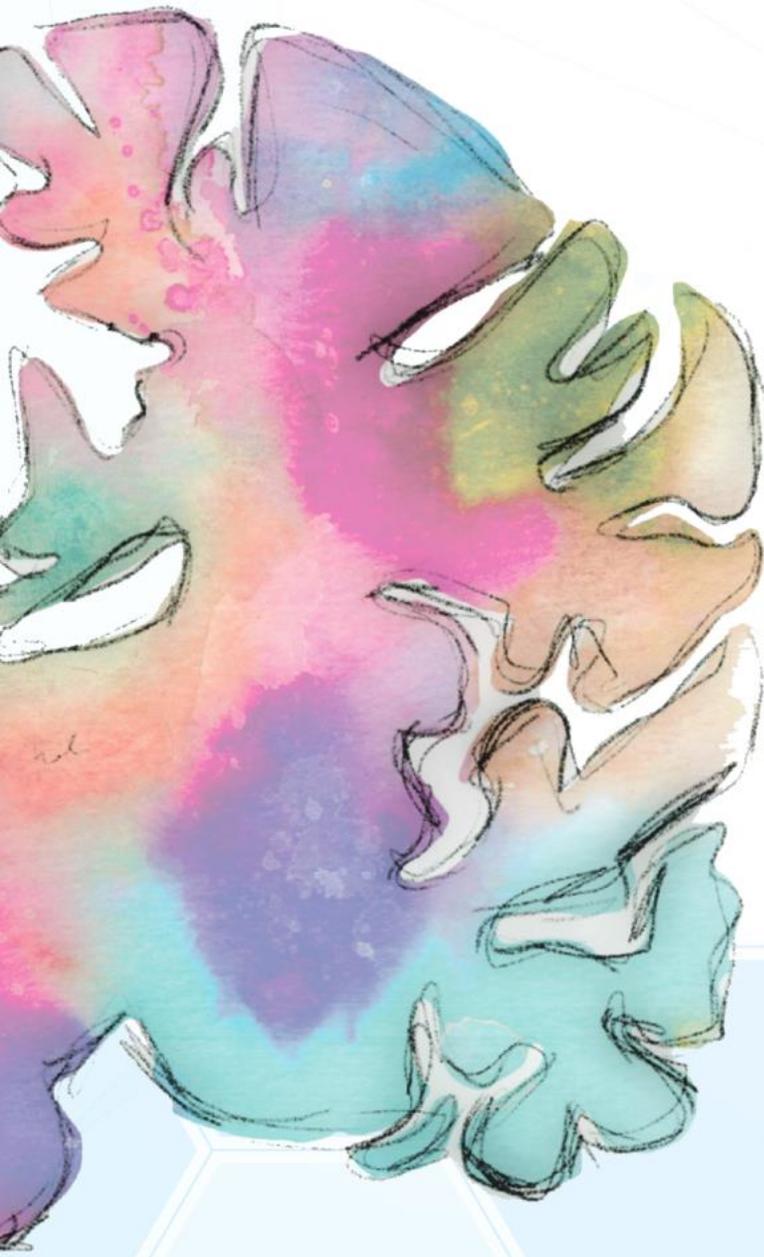


ADOPTED CHARITY



www.neuro-criticalcare.org

ASIA PACIFIC
NEUROCRITICAL CARE
CONFERENCE 2024

A watercolor-style illustration of a human brain, rendered in various colors including purple, blue, green, and orange. The drawing is positioned on the left side of the slide, partially overlapping the hexagonal background pattern.

INDIVIDUAL REGISTRATION



ASIA PACIFIC NEUROCRITICAL CARE CONFERENCE 2024

28-30 JUNE 2024, FRIDAY – SUNDAY, BORNEO CONVENTION CENTRE, KUCHING SARAWAK, MALAYSIA



Personal Information

Salutation*

First/Given Name*

Last/Family Name*

Job Title*

Organisation*

Country*

Business Email*

Business Email Confirmation*

Business Mobile*

Profession*

How did you hear of APNCC 2024?*

- APNCC Electronic Direct Mailer (EDM)
- Facebook
- Instagram
- LinkedIn
- Word of Mouth
- Others

Terms & Conditions

- * I agree that Kenes MP Asia may collect and use my personal data which I have provided in this form to provide marketing information relevant to APNCC 2024 and any other information that I have agreed to receive.
- * I agree to receive information sent by Kenes MP Asia about related products and services including but not limited to offers, information and new goods and services via the given email.

APNCC 2024 privacy policy: <https://neuro-criticalcare.org/privacy-policy/>

2 Acknowledge Terms and Conditions

1 Complete all personal information fields

Next

3 Click **Next** to continue

NOTE Ensure that pop-ups and redirects has been enabled in your browser settings. View page 17 for more details.



Registration Summary

Salutation

First/Given Name

Last/Family Name

Job Title

Organisation

Country

Business Email

Business Email Confirmation

Business Mobile

Registration Type

IC Number

Member Societies

Profession

Dietary Requirements

How did you hear of APNCC 2024?

| Owner Name | Description | Price | Qty | SubTotal |
|------------|----------------|------------|-----|------------|
| | | MYR 650.00 | 1 | MYR 650.00 |
| | Sub Total | | | MYR 650.00 |
| | Grand Total | | | MYR 650.00 |
| | Payable Amount | | | MYR 650.00 |

NOTE
Ensure all details are correct before making payment

Payment Options for Local Delegates

Mode Of Payment

- By Credit Card (Visa or MasterCard)
 - MP Singapore Pte Ltd acts on behalf of the Asia Pacific Neurocritical Care Conference 2024 to handle fee collection.
 - All credit card charges will be made by merchant name: MP Singapore Pte Ltd.

OR

- By Online Banking (Private Hospitals in Malaysia)
 - All payments are to be issued in favour of **"Persatuan Kakitangan Anestesiologi Hospital Umum Sarawak"**
 - Account No.: 80-0930110-6
 - Name of Bank: CIMB Bank Berhad
 - Address of Bank: Wisma Satok, Jalan Satok, Kampung Bandarshah, 93400 Kuching, Sarawak
 - Swift Code: CIBBMYKLXXX
 - Ref 1: Reg fee APNCC
 - Ref 2: Name

NOTE
Upload a screenshot of the proof of payment. Registration will only be confirmed by the Secretariat after payment has been made.

Upload button to capture uploaded screenshot (file type: Jpeg, Jpg, pdf, file size: max. 50kb)

Please upload a screenshot of the online payment made.

Please select some file



Registration Summary

Salutation

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| | | | Grand Total | MYR 650.00 |
| | | | Payable Amount | MYR 650.00 |

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Payment Options for International Delegates

Mode Of Payment

- By Credit Card (Visa or MasterCard)
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 - All credit card charges will be made by merchant name: MP Singapore Pte Ltd.

OR

- By Telegraphic Transfer (For International)
 - Additional USD 25 bank charges is required.
 - Please ensure that the name of the participant is stated on the transaction draft.
 - Bank charges are the responsibility of the payer and should be paid in addition to the registration fees.
 - Please make bank drafts payable to:
 - Beneficiary Bank Name: DBS Bank Ltd, Singapore
 - Beneficiary Bank Address: 12 Marina Boulevard, DBS Asia Central, Marina Bay Financial Centre Tower 3, Singapore 018982
 - Beneficiary Account Name: MP Singapore Pte Ltd
 - Beneficiary Account Number: 033-016215-4
 - Beneficiary SWIFT BIC Code: DBSSSGSG



Success

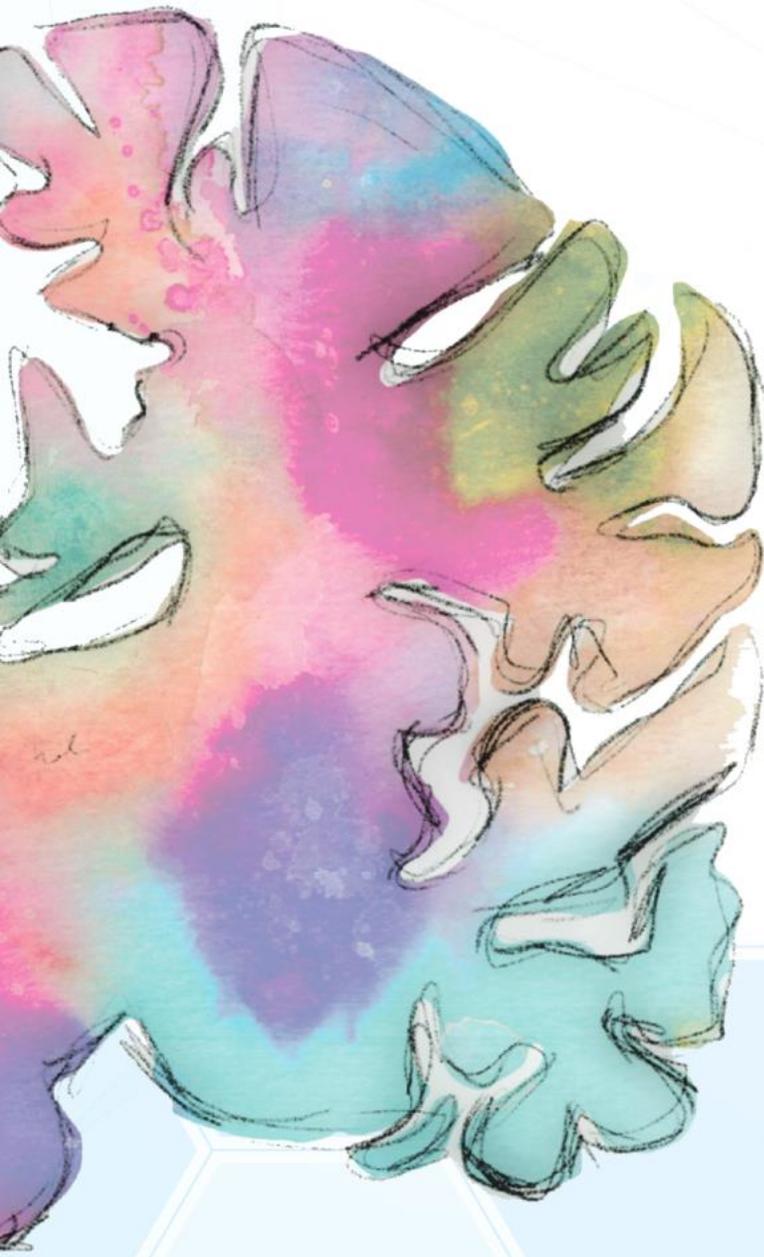
Thank you for completing the registration process.

An email with your invoice/receipt will be sent to your registered email id. If you did not receive the email, please contact the Organizer at registration@neuro-criticalcare.org.

NOTE

After making payment, a confirmation page will appear stating that you have completed registration.

ASIA PACIFIC
NEUROCRITICAL CARE
CONFERENCE 2024

A watercolor-style illustration of a human brain, rendered in various colors including purple, blue, green, and orange. The drawing is positioned on the left side of the slide, partially overlapping the hexagonal background pattern.

GROUP REGISTRATION



Contact Person

Kindly note that this page is strictly for the group coordinator. If you are a group coordinator and attending the conference, kindly fill in your details as a member too.

Salutation*

First/Given Name*

Last/Family Name*

Job Title*

Organisation*

Country*

Business Email*

Business Email Confirmation*

Business Mobile*

Profession*

How did you hear of APNCC 2024?*

- APNCC Electronic Direct Mailer (EDM)
- Facebook
- Instagram
- LinkedIn
- Word of Mouth
- Others

2 Acknowledge Terms and Conditions

Terms & Conditions

- * I agree that Kenes MP Asia may collect and use my personal data which I have provided in this form to provide marketing information relevant to APNCC 2024 and any other information that I have agreed to receive.
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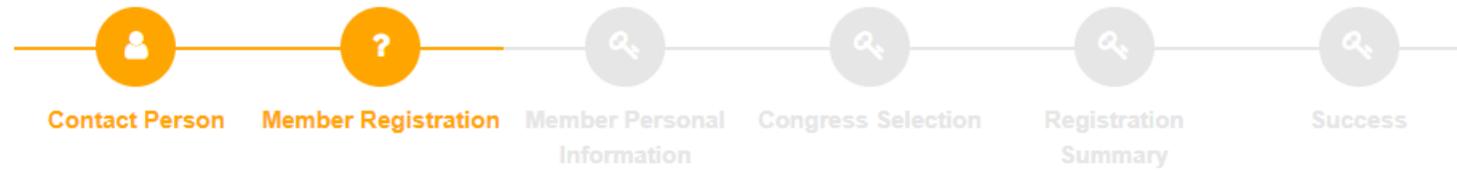
1 Complete all contact person information fields

NOTE
Please take note of the remark

Next

3 Click **Next** to continue

Ensure that pop-ups and redirects has been enabled in your browser settings. View page 17 for more details.



Member Registration

Add Member

NOTE

Click on **Add Member** to proceed with group registration.

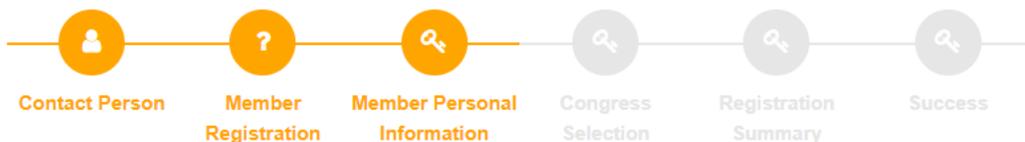
Back

Submit



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Member Personal Information

| | |
|------------------------------|----------------------|
| Salutation* | <input type="text"/> |
| First/Given Name* | <input type="text"/> |
| Last/Family Name* | <input type="text"/> |
| Job Title* | <input type="text"/> |
| Organisation* | <input type="text"/> |
| Country* | <input type="text"/> |
| Business Email* | <input type="text"/> |
| Business Email Confirmation* | <input type="text"/> |
| Business Mobile* | <input type="text"/> |
| Registration Type* | <input type="text"/> |
| IC Number | <input type="text"/> |
| Member Societies | <input type="text"/> |
| Profession* | <input type="text"/> |

1 Complete all personal information fields

NOTE
For **Local Doctors**, select 'Doctor' under Registration Type, and key in your **IC Number** to qualify for CPD points.

NOTE
For Local Doctors who are part of the member societies, kindly select the society from the list. Your registration would be classified as 'Doctor (Member)'.
For Local Doctors who are not part of the member societies, kindly select '**None**'. Your registration would be classified as 'Doctor (Non-Member)'

NOTE
If you are both the Contact Person and an attending delegate, kindly fill in your particulars as part of the group registration.



Dietary Requirements

Vegetarian

How did you hear of APNCC 2024?*

APNCC Electronic Direct Mailer (EDM)

Facebook

Instagram

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Word of Mouth

Others

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Back

Next

3

Click **Next** to continue

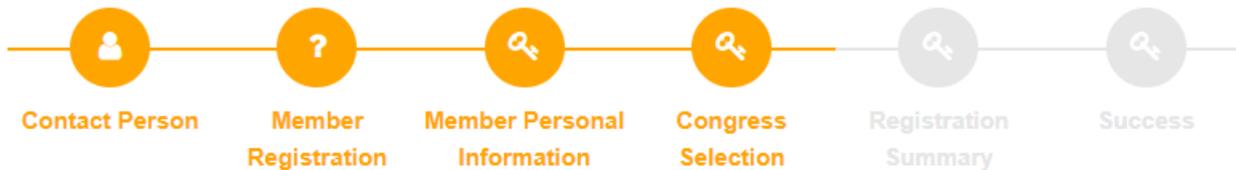
2

Acknowledge Terms and Conditions



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Congress Selection

Doctor (Non-Member)

MYR 650.00



Promo Code

Apply

1 Select the ticket type by clicking on the checkbox. List of workshops will appear after clicking on the checkbox.

Workshop (28 June 2024, Friday)

Click [here](#) for more information of the workshops

2 Select the workshop(s) you would like to attend

| | | |
|---|------------|--------------------------|
| Emergency Neurological Life Support (ENLS) Workshop (Specialist Doctor) – Local | MYR 400.00 | <input type="checkbox"/> |
| Emergency Neurological Life Support (ENLS) Workshop (Non-Specialist Doctor) – Local | MYR 300.00 | <input type="checkbox"/> |
| Neuromonitoring - External Ventricular Drain/ Intracranial Pressure Monitoring | MYR 250.00 | <input type="checkbox"/> |
| POCUS in Neurocritical Care | MYR 250.00 | <input type="checkbox"/> |

NOTE

Kindly check if the ticket type is correct before proceeding with the registration

Back

Next

3 Click **Next** to continue



NOTE
Minimum of 2 pax to proceed with group registration check out

Member Registration

Add Member

1
Click on **Add Member** to add more people

| Name | Email | Actions |
|----------|-------|---------------------------------------|
| Member 1 | | Edit Delete |
| Member 2 | | Edit Delete |

Back Submit

2
Click **Submit** once all members are added



Registration Summary

| | |
|--|--------------------------|
| Salutation | Prof |
| First/Given Name | Joyce |
| Last/Family Name | Gao |
| Job Title | PE |
| Organisation | MPI |
| Country | MALAYSIA |
| Business Email | joyce.gao@mpinetwork.com |
| Business Email Confirmation | joyce.gao@mpinetwork.com |
| Business Mobile | 123 |
| Profession | Emergency medicine |
| How did you hear of APNCC 2024? | Word of Mouth |

| Owner Name | Description | Price | Qty | SubTotal |
|----------------------|--|------------|-----|--------------|
| Member 1 | Doctor (Non-Member) | MYR 650.00 | 1 | MYR 650.00 |
| Member 2 Member 2 | Allied Health (Nurse/Assistant Medical Officer/Others) | MYR 400.00 | 1 | MYR 400.00 |
| | Sub Total | | | MYR 1,050.00 |
| | Grand Total | | | MYR 1,050.00 |
| | Calculated Due Amount | | | MYR 1,050.00 |

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Registration Summary

| | |
|--|--------------------------|
| Salutation | Prof |
| First/Given Name | Joyce |
| Last/Family Name | Gao |
| Job Title | PE |
| Organisation | MPI |
| Country | MALAYSIA |
| Business Email | joyce.gao@mpinetwork.com |
| Business Email Confirmation | joyce.gao@mpinetwork.com |
| Business Mobile | 123 |
| Profession | Emergency medicine |
| How did you hear of APNCC 2024? | Word of Mouth |

| Owner Name | Description | Price | Qty | SubTotal |
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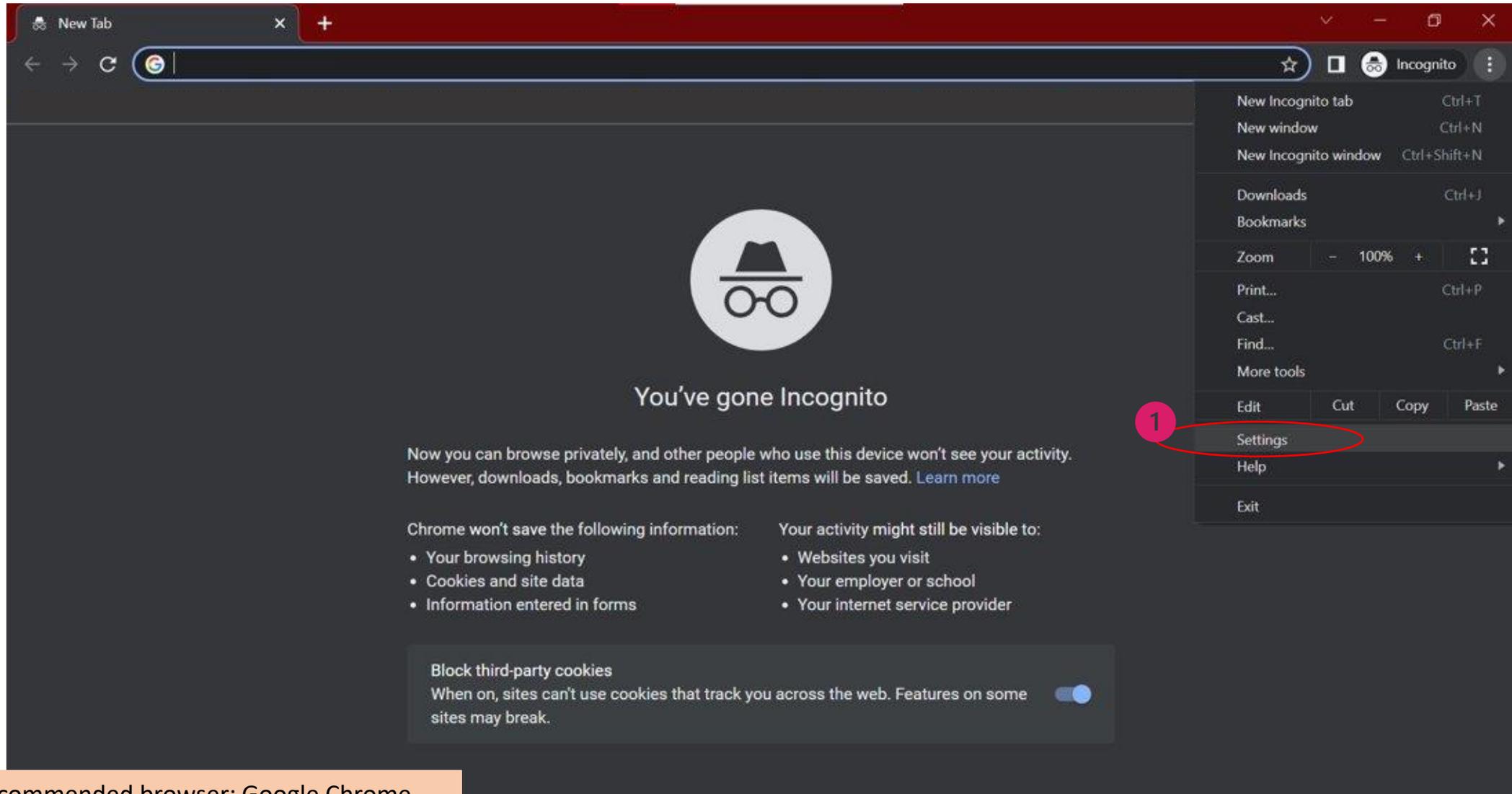
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TROUBLESHOOTING GUIDE

Disabling Pop Up Blocker



NOTE
Recommended browser: Google Chrome



Settings

- You and Google
- Autofill
- 1** Privacy and security
- Appearance
- Search engine
- Default browser
- On startup
- Advanced
- Extensions
- About Chrome

Search settings

Safety check

Chrome can help keep you safe from data breaches, bad extensions, and more [Check now](#)

Privacy and security

- Clear browsing data
Clear history, cookies, cache, and more
- Cookies and other site data
Third-party cookies are blocked in Incognito mode
- Security
Safe Browsing (protection from dangerous sites) and other security settings
- 2** Site Settings
Controls what information sites can use and show (location, camera, pop-ups, and more)
- Privacy Sandbox
Trial features are on



Settings Search settings

- You and Google
- Autofill
- 1** Privacy and security
- Appearance
- Search engine
- Default browser
- On startup
- Advanced
- Extensions
- About Chrome

Pop-ups and redirects

Search

Sites might send pop-ups to show ads, or use redirects to lead you to websites you may not want to visit

Default behavior

Sites automatically follow this setting when you visit them

- 2** Sites can send pop-ups and use redirects
- Don't allow sites to send pop-ups or use redirects

Customized behaviors

Sites listed below follow a custom setting instead of the default

Not allowed to send pop-ups or use redirects Add

No sites added

Allowed to send pop-ups and use redirects Add

NOTE Ensure that this checkbox is enabled



**ASIA PACIFIC
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CONTACT

registration@neuro-criticalcare.org