

Become a Certified IBITA Practitioner

15-Day Basic Course on The Assessment and Treatment of Adults with Neurological Conditions -The Bobath Concept

Course code: AE-23B-01

By Dr Rosanna Chau

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Module I 15-19 Jan 2024 **Module II** 22-26 Jan 2024

Module III 18 - 22 Mar 2024 @8:30-17:30

Accreditations CPD-PT: 15 points; CPD-OT: 18 points




Continuing Rehabilitation Centre, SAHK
G/F, Tung Wong House,
Tai Hang Tung Estate, Shek Kip Mei

REMARKS

- **Quotable qualification** approved by the Physiotherapists Board.
- Subject to postponement due to COVID situation.
- Refund is **NOT** applicable for the postponement of Modules II & III.
- **Maximum absence limit** for certification: 8 hours

Enquiries

 2778 6191

 irp@sahk1963.org.hk

 <http://irp.sahk1963.org.hk>

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| For Office Use Received on: _____ Handled by: _____ |
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Course Enrolment Form

PERSONAL INFORMATION

Name: Mr/Ms* _____

Occupation: _____ Organization: _____

Contact number: _____ (mobile) _____ (office)

Correspondence Address: _____

Email Address (1): _____ Email Address (2): _____

Registration number: _____ (applied for CNE/CPD awarded course)

COURSE TO ENROL IN

| Course Title | Course Code | Registration Fee |
|--|-------------|------------------|
| 15-Day Basic Course on The Assessment and Treatment of Adults with Neurological Conditions -The Bobath Concept | AE-23B-01 | HK\$32,000 |

PAYMENT

Payment should be in HK dollars and made payable to "SAHK".

Bank name: _____

Cheque number: _____

*Delete as appropriate

I, the applicant, understand that the information provided on this form will be used by the SAHK Institute for course enrolment and administration purposes, and: (please '✓')

- I agree to the Institute keeping my personal data and wish to receive other course information from the Institute.
- I agree to the Institute keeping my personal data but do not wish to receive other course information from the Institute.
- I request to delete my personal data after completion of the course (Please note that the Institute cannot process your application for re-issuing of certificate, receipt, checking of CE points etc. after deletion).

Applicant's Signature: _____ **Date:** _____

Application Method:

To register, complete and return this form together with cheque, money order or bank draft to:

SAHK Institute of Rehabilitation Practice
 17/F, 21 Pak Fuk Road, North Point, Hong Kong SAR

Please mark "Course Application" on the envelope and put down the "applicant's name" and "course name" on the back of the cheque, money order or bank draft.

Note:

1. Each enrolment form may only be used to apply for one course. Application to different courses must submit separate application with separate cheques, money orders or bank drafts.
2. Please fill out the required information in block letters and check the accuracy before mailing.
3. Course fees are non-refundable and non-transferable.
4. Refund will only be arranged upon course cancellation by the organizer.
5. Receipt acknowledgements and application results will be sent by e-mail.

6. For any enquiries, please contact us at (852) 2778 6191 or e-mail us at: irp@sahk1963.org.hk