

**Registration Form**  
**8th Thailand Orthopaedic Trauma Annual Congress (TOTAC) 2019**  
**“How can we operate as an expert? Pearls and pitfalls”**  
**February 20-22, 2019**  
**at Meeting room, Queen Savang Vadhana Memorial Hospital,**  
**Chonburi Province, Thailand**

\*\*\*\*\*

**Name-Surname:** .....

**Department:** .....

**Institution:** .....

**Country:** .....

**E-mail:** .....

**Registration Rate**

Type	Rate
<input type="checkbox"/> <b>Participant</b>	<b>100 USD</b>
<input type="checkbox"/> <b>Resident</b>	<b>50 USD</b>

**Trauma Night (January 20, 2019)**

- Attend Trauma Night**
- Not Attend Trauma Night**

**Payment by**

**Cash**

**Transfer to**

Beneficiary Name: The Royal College of Orthopaedic Surgeons of Thailand

Beneficiary Address: 4th floor, the Royal Golden Jubilee Building,  
2 Soi Soonvijai, New Petchburi Road, Huaykwang,  
Bangkok, 10310, THAILAND

Account Name: The Royal College of Orthopaedic Surgeons of Thailand

Account Number: 051-2-40014-4

Swift code/Bank code: SICOTHBK

Bank Name: Siam commercial bank public company limited

Branch: Rajvithi Hospital Branch

Bank Address: Rajvithi Hospital, Rajavithi Rd., Rajthevee,  
Bangkok 10400, Thailand

**Note**

- 1. All transfer fees must be responded by sender**
- 2. Please send us the copy of pay-in slip to confirm your payment to**  
[rcost04@gmail.com](mailto:rcost04@gmail.com) or fax: 662-716-5440