Hong Kong Academy of Medicine Press 10/F, 99 Wong Chuk Hang Road Aberdeen, Hong Kong Tel: (852) 2871 8809

Fax: (852) 2515 9061



LOCAL SUBSCRIPTION

I would like to subscribe the *Hong Kong Medical Journal*. The price of subscription for \underline{six} issues (e.g. Volume 25, Number 1-6, 2019; supplements not included) is HK\$840.

Name	e of subscriber / organisation:
Telep	hone: E-mail:
Corre	espondence/billing address:
Conta	act person:
Deliv	rery address (if not the same as above):
Subs	cription period: From Volume Number to Volume Number
0	Please send me an official receipt
Paym	ent method:
0	Electronic payment: make bank transfer to the following account and attach a copy of the receipt with this form:
	HKD saving account name: HONG KONG ACADEMY OF MEDICINE HKD saving account number: 024-290-9-020055
0	Cashier's order
	Cheque: attach a cheque payable to Hong Kong Academy of Medicine with this form
	Bank draft: attach a bank draft payable to Hong Kong Academy of Medicine with this form
	Credit card: please complete the section below
	I hereby authorize "Hong Kong Academy of Medicine" to debit the stated amount from my credit card:
	Name of cardholder (as on the card):
	Card number:
	Expiry date (MM/YY):
	Total amount: ☐ HK\$840
	Cardholder's signature: Date: