



ATTENDEE DETAILS

PLEASE COMPLETE IN BLOCK CAPITAL LETTER

Prof. Dr. Mr. Mrs. Ms.

Last Name

First Name

Institution

Position/Role

Postal Address

Telephone (Mobile)

Email*

* (Required for Confirmation)

FEES: GHS500 per participant

Fees paid would cover tuition and course materials. It is recommended that payment of the fees be made before the date of the workshop.

Proof of payment would be required before a participant would be allowed into workshop.

Payments can be made at any of the FDA offices countrywide

PAYMENT METHODS: Cash/Banker's draft to any of FDA's offices nationwide.

Or

Bank transfer to: Bank of Ghana, A/C No. 1018631529507, swift code: BAGHGHAC

Nominees are expected to pay by Friday, 18th August 2023 to enable the FDA make suitable arrangements for their participation.

By Signing below, I confirm that I agree with FDA's Terms and Conditions of attendance

Signature	Date
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All cancellations must be made in writing and must be received at the FDA Head Office for at least ten (10) working days prior to the event start date.

Transfer Policy

You may transfer your registration to a colleague prior to the start of the event. Please notify the FDA office of any such substitutions as soon as possible.

Photography Policy

By attending the event, you give permission for image of you, captured during the conference through video, photo, and/or digital camera, to be used by FDA in promotional materials, publications, and website.