



旅遊學院  
INSTITUTO DE FORMAÇÃO TURÍSTICA  
Institute for Tourism Studies



The Hotel School  
Cornell  
SC Johnson College of Business

**Executive Development Programme  
New Media in Hospitality Marketing  
「酒店業營銷新媒體」高級管理課程  
9 – 10 October 2018**

**- REGISTRATION FORM -**

A. 個人資料 Personal data			
A.1 中文姓名 Name in Chinese		A.2 性別 Gender	
A.3 外文姓名 Name in English			
A.4 國籍 Nationality		A.5 出生日期 Date of birth	
A.6 身份證編號 ID card number		A.7 流動電話 Mobile number	
A.8 公司聯絡電話 Office contact number		A.9 住宅聯絡電話 Home contact number	
A.10 電子郵件 Email			

備註 Remark:

- 必須提交身份證明文件(雙面)副本 Required to submit ID card / Passport copy of both sides
- 證書將按身份證明文件之名字發出 Name print on Certificate will be based on the name printed on ID card / Passport.

B. 學歷 Academic qualification	
B.1 學歷或專業資格 Academic or professional qualification	<input type="checkbox"/> 小學 Primary school <input type="checkbox"/> 初中 Junior school <input type="checkbox"/> 中學 Secondary school <input type="checkbox"/> 中專 Secondary technical school <input type="checkbox"/> 大專/文憑 Junior College / Diploma <input type="checkbox"/> 高級文憑 Higher Diploma <input type="checkbox"/> 學士學位 Bachelor Degree <input type="checkbox"/> 碩士學位 Master Degree <input type="checkbox"/> 博士學位 Doctoral Degree
B.2 學校名稱 Name of school or institution	

C. 現時職業 Current occupation			
C.1 公司名稱 Company name		C.2 職位 Position held	

D. 1 報名費 Registration Fee*	
<input type="checkbox"/> 澳門本地居民 Macao ID cardholders	<b>MOP 8,650</b>
<input type="checkbox"/> 非澳門本地居民 Non-Macao ID cardholders	<b>MOP 14,840</b>
D.2 支付方式 Payment Method	
<input type="checkbox"/> 公司支票 Company Cheque / 本票 Bank Draft <input type="checkbox"/> 信用卡 Credit Card <input type="checkbox"/> 現金 Cash	
D.3 課程由僱主贊助報讀 Enrolment sponsored by employer: 是 Yes <input type="checkbox"/> 否 No <input type="checkbox"/>	

\*報名費包括課程資料, 午膳及茶點 Registration fee covers course materials, lunches and refreshments during the programme

**E. 學習目標 Learning Goal** - To enable the programme instructor to effectively meet participants' expectations, please let us know what specific learning goals you expect to cover:

**F.1 特別飲食安排 Special Dietary Arrangement**

請說明是否需要特別飲食安排 Please specify if any special dietary arrangement is required

☐Vegetarian      ☐No Pork      ☐No Beef      ☐No Seafood      ☐Others: \_\_\_\_\_

**G. 如何得知有關課程? How were you informed about this programme?**

☐News ad      ☐Email      ☐Webpage      ☐Human Resources dept.      ☐Others: \_\_\_\_\_



獲教育暨青年局“持續進修發展計劃”批准課程

Approved by the Continuous Improvement and Development Programme of DSEJ

課程編號 Course Code: 1804190020-0

**H.** 使用教育暨青年局“持續進修發展計劃”(只限本地居民):  
Use of Continuous Improvement and Development Programme of DSEJ (Macao Resident Only):  
是 Yes ☐ 否 No ☐

**Registration Deadline:** 17 August 2018

**Payment Deadline :** **31 August 2018**

*(Once the course is confirmed, credit card payment can be done online, or debit note will be issued for other payment methods. Seats are NOT guaranteed without settling the payment before deadline)*

**Cancellation Policy :** No refund will be made in case of participant's withdrawal or no-show.

**Disclaimer :** We reserve the right to postpone or cancel the course. In the case of cancellation, participants will NOT be subject to any charge or compensation.

1. 本人聲明上述A-H項全屬事實，本人願意遵守課程之規定。

I declare that the information given in Parts A to H in this application form is true. I am aware of all the rules and regulations of the course.

2. 根據《個人資料保護法》規定，本人同意所提供的個人資料及文件只用作申請報讀課程手續、提供作服務統計及研究；另外，當有需要時，同意將所提供的個人資料及文件轉移至澳門特別行政區政府的行政機關或司法機關之用。聲明人可以透過書面向本學院查閱和更正所備存的個人資料。According to the "Law of Personal Data Protection", I hereby agree that the provision of my personal information and document is only used for completing the course application procedure, for fulfilling statistic and research purposes. In addition, I also agree that my personal information and document thus submitted might be forwarded to administrative bodies and legal authorities of MSAR Government when deemed necessary. Declarer could request to the Institute in written form for reviewing and updating his/her personal information.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**If you have further query, please feel free to contact:**

**Tel:** (853) 8598 1281/ 8598 1344

**Fax:** (853) 8598 1283

**Email:** [edp@ift.edu.mo](mailto:edp@ift.edu.mo)

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**Colina de Mong-Ha, Macao, China**