

**Food Safety Talk Series 2019 on  
“Empower Consumers to Ensure Food Safety” (Public Series)**

**Enrollment Form**

(for Public)

**Organizer** : Centre for Food Safety

**Theme** : Introduction of topics on “Risk of Eating Raw Foods”, “Risk of Picking and Eating Wild Plants/Mushrooms”, “Buying/Selling Foods Online and Food Safety”, “Reading Nutrition Labels Helps Preventing Chronic Diseases” and “Choosing Food Safety Information Wisely” & “Introduction of HACCP, the threats of AMR, and Five Keys to Food Safety” and “Nutrition Label”

**Remarks** : **Free of charge.** Each participant will receive a certificate of attendance. Seats are limited, please register early.

**Venue** : **❶ Exhibition Gallery of Tsuen Wan Town Hall**  
72 Tai Ho Road, Tsuen Wan

**24.7.2019 (Wednesday)**  
**3:00-5:00pm**  
*\*Deadline : 10.7.2019*

**❸ Lecture Theatre of Hong Kong Central Library, 66 Causeway Road, Causeway Bay**

**20.9.2019 (Friday)**  
**2:30-4:30pm**  
*\*Deadline : 6.9.2019*

**❷ Lecture Hall of Hong Kong Science Museum, 2 Science Museum Road, Tsim Sha Tsui East, Kowloon**

**5.8.2019 (Monday)**  
**3:00-5:00pm**  
*\*Deadline : 22.7.2019*

**❹ Lecture Room of Yuen Long Theatre, 9 Yuen Long Tai Yuk Road, Yuen Long, New Territories**

**2.10.2019 (Wednesday)**  
**10:30am-12:30pm**  
*\*Deadline : 17.9.2019*

**Enrollment** : Please complete the slip below and return it by mail or by fax (2787 3621) before deadline.

**Notification** : Successful enrollment will be notified separately before the talk. **Unsuccessful enrollment will be not notified.**

**Enquiry phone no** : **2381 6575**

**(Reply Slip)**

To : CRU, Centre for Food Safety

Fax no. : 2787 3621 (Do NOT double apply)

Name of participant : \_\_\_\_\_

\*Mr./Miss/Ms. (\*Please delete where appropriate)

Tel. no. : \_\_\_\_\_

Fax no. : \_\_\_\_\_

Seminar(s) Chosen : (Please tick the appropriate box(es))

❶ Tsuen Wan Town Hall - Exhibition Gallery	❷ Hong Kong Science Museum - Lecture Hall	❸ Hong Kong Central Library - Lecture Theatre	❹ Yuen Long Theatre - Lecture Room
<input type="checkbox"/> 24.7.2019	<input type="checkbox"/> 5.8.2019	<input type="checkbox"/> 20.9.2019	<input type="checkbox"/> 2.10.2019

**(Reply Slip)**

Name of participant : \_\_\_\_\_

Address : \_\_\_\_\_