

SUPPLEMENTARY MEDICAL PROFESSIONS ORDINANCE

(Chapter 359)

**PHYSIOTHERAPISTS (REGISTRATION AND DISCIPLINARY
PROCEDURE) REGULATION**

Particulars of a Company carrying on the Business
of Practising Physiotherapy

Presented by
(Name of Company)

of
(Registered Business Address)

.....
(Business Registration Certificate No.)

Particulars of the names and addresses of all persons who are professionally qualified directors, other directors or managers of the above company in respect of the business of physiotherapy carried on by it at

.....
.....

under the name of

Name in full	Position	Certificate of Registration No. and Date of Registration where Directors are registered	Part registered in	Residential Address

and of persons who practise physiotherapy in connection with the business of the said company in the above.

Name in full	Residential address	Occupation	Qualifications	Certificate of Registration No. and Date of Registration	Part registered in	Duties Performed

Dated this day of 20.....

Signature
(State whether director or manager or secretary)

Guidance Notes

1. Completed forms should be sent to the Secretary, Physiotherapists Board, 2/F, Shun Feng International Centre, 182 Queen's Road East, Wan Chai, Hong Kong within 14 days after 1 July in each year.
2. If there are branch offices, the address of each of these offices should also be included in the second paragraph.
3. Both Chinese and English names (if any) of the directors and employees should be entered in the form. All other particulars may be entered in one language only, either Chinese or English.
4. For the "Occupation" column on Page 2, just fill in the position of the employee in the company. For the "Duties performed" column, a simple description of the duties of the employee will do.
5. ***For the sake of easy contact, please write down the contact telephone number and the name of the responsible person at the left bottom corner of the form.***
6. In case of enquiries, please telephone 2527 8369.