



Please use block letters and read the Notes on Personal Data (Privacy) Ordinance before filling this form.

Mother's Information		<input type="checkbox"/> Staff or Dependant <input type="checkbox"/> Associate Doctor or Dependant – DR Code () <input type="checkbox"/> Board Member or Dependant <input type="checkbox"/> Convention Member or Dependant		
Antenatal No. : _____				
Hospital No. : _____				
English Name:				
H.K.I.D./Passport No.:		Date of birth: DD MM YY		
Occupation:	Nationality:	Contact Tel No:		
Address :				
Overseas Address (if applicable):				
Husband's Information				
English Name:				
H.K.I.D./Passport No.:		Date of birth: DD MM YY		
Occupation:	Nationality:	Other contact Tel No:		

Terms and Conditions (Subject to change without prior notice) :

- Advance maternity deposit for a HK resident or non-Mainland China Foreigner is HK\$10,000. This deposit serves only to reserve a maternity bed for confinement. It does not constitute a binding agreement with the Hospital or attending obstetrician on the type of clinical obstetric service, bed arrangement or service charges. The clinical service, bed allocation and service charges will be determined according to clinical condition and prevailing hospital policy upon admission for confinement.
- The Deposit is not refundable, save for provision below. It will be used to cover part of the hospital obstetric service charges, including any administrative charges. Please settle excess expenses before discharge.
- Maternity booking is based on the class of Standard Ward. Expectant mother who selects higher bed class would be required to pay additional deposit on admission. While availability of the higher class bed cannot be guaranteed, no advance reservation of higher class bed can be made.
- Admission deposit for non-HK residents is \$55,000. Expectant mother who is non-HK resident will be required to pay the balance amount (\$45,000) on admission.
- Booking of Operation Theatre for elective caesarean delivery, which is independent from maternity booking, will be made on first come first served basis.
- Advance deposit is not refundable.** The only exceptions are :
 - For abortion or fetus with major congenital abnormalities certified before 20 weeks gestation by the attending obstetrician with supporting document, Full refund will be arranged.
 - Any other special occasions will have to be approved by the senior hospital management. HK\$3,000 will be charged by the Hospital. HK\$7,000 will be refunded.
 - Application for refund must be submitted within 3 months from the date of abortion or delivery with evidencing document.**

Refund will only be released to expectant mother or the authorized person bearing her authorization letter. If the deposit has been made by a credit card/ China Union Pay Card, refund will only be reimbursed back to the same credit card/ China Union Pay Card account.

Remarks:

If the expectant mother is our Staff or Dependant, Board-member or Dependant, Associate Doctor or Baptist Convention Member, please fill in this form and return to your doctor before **20** week gestation. Your doctor will then send this form to our hospital.

I confirm that I have read and accept the above Terms and Conditions.

Expectant mother's signature: _____

Date: _____