

Tobacco Control Office of the Department of Health
Application Form for Smoking Cessation Health Talk

(A) Objectives

Health hazards of smoking will be explained to smokers in order to raise their motivation to quit smoking. Methods of quitting smoking and information on drugs for quitting smoking as well as clinic services will be introduced.

(B) Details

1. Attendance: 20-50 51-70 Other _____
2. No. of session: _____ session(s) Total attendances: _____
3. Duration: 45 minutes 1 hour Other _____
4. Time: _____
5. Expected date: (1) _____ (2) _____ (3) _____
6. Language: Cantonese English
7. Venue: _____

(C) Applicant's Information

Interested organisation or institution should fax the completed application form to Tobacco Control Office at 3582 4087 by fax or by mail to Room 1030, 10/F, Wu Chung House, 213 Queen's Road East, Wan Chai, Hong Kong. Please call 2961 8823 for any enquiry.

Name of organization/institution:

(Chinese) _____

(English) _____

Address: _____

Contact Person: _____ Post: _____

Telephone: _____ Fax: _____

Email: _____