

To: Rehabilitation and Medical Social Services Branch  
Social Welfare Department  
[Attn: Miss AU-YEUNG Ling, Kennix / A(RM)10]

(Please return by fax: 2893 6983, ***on or before 6 December 2024 at 5:00 pm***)

<b>Reply Slip</b>
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Name of Organisation : \_\_\_\_\_

**Briefing Session on Invitation for Proposals for Operating the  
Parents/Relatives Resource Centre for Carers of Persons in Mental Recovery**

Date : 10 December 2024 (Tuesday)  
Time : 3:00 p.m.  
Place : Wan Chai Activity Centre, LG/F, Wan Chai Market,  
258 Queen's Road East, Wan Chai, Hong Kong

Please be informed that the following staff of this organisation will attend the briefing session:

	Name	Post
1.		
2.		
3.		

Name : \_\_\_\_\_

Post : \_\_\_\_\_

Tel. No. : \_\_\_\_\_

Email address : \_\_\_\_\_

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