



הארגון הבינלאומי של עורכי-דין ומשפטיים יהודים (ע"ר)
THE INTERNATIONAL ASSOCIATION OF JEWISH LAWYERS AND JURISTS (R.A.)

**The 16th Congress of
The International Association of Jewish
Lawyers and Jurists**

**50 Years of a United Jerusalem - Legal,
Geo-Strategic, and International Aspects**

Jerusalem, November 29 - December 1, 2017

Registration Form

First Name: _____ Last Name: _____

Congress events (Please mark your choices):

Wednesday, November 29

Opening Ceremony at Hotel Citadel, Jerusalem
including Cocktail Dinner US\$ 85 X __ people = _____

Thursday, November 30

Seminar at The Van Leer Jerusalem Institute
including Coffee Break and Lunch US\$ 43 X __ people = _____

Gala Dinner at Beit Shmuel, Jerusalem
including live music US\$ 72 X __ people = _____

Friday, December 1

Seminar at The Van Leer Jerusalem Institute
including Coffee Break US\$ 23 X __ people = _____

Accommodation at the David Citadel Hotel:

Accommodation at the David Citadel Hotel is on B&B basis.

Guests staying at the hotel will have transportation to all events.

Kindly note that the reduced rates are for a limited number of rooms that will be available for participant's accommodation on the conference dates only (**Nov.29 to Dec.2**). If you wish to stay longer or arrive earlier than these nights, regular hotel rates will apply (see below).

Accommodation dates:

Check- in date: _____ Check- out date: _____

Special request (from the hotel):

Reduced rates accommodation during the congress:

Single room for dates _____ US\$ 160 X __ nights = _____

Double/Twin room for dates _____ US\$ 170 X __ nights = _____

Regular rates accommodation before/after the congress:

Single room for dates _____ US\$ 360 X __ nights = _____





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() Double/Twin room for dates _____ US\$ 370 X ___ nights = _____

Additional reservation:

() Shabbat Dinner at Hotel Citadel

(for hotel guests, only) US\$ 78 X ___ people = _____

Total US \$ _____

Please complete all details in CAPITAL LETTERS and send filled in form to Dirigo

Registration department at: Fax: +972-9-7797647

or e-mail: registration@dirigo-pro.com

Registration forms must be submitted by Nov. 15.

For any question or special request Please contact us at + 972 9 7797645

Personal Details:

Surname: _____ First name: _____

Passport number: _____ * please attach a photocopy

Address: _____ Mobile: _____

E-mail: _____

City: _____ Zip code: _____ Country: _____

Accompanying persons:

Surname: _____ First name: _____

Passport number: _____ * please attach a photocopy

Address: _____ Mobile: _____

E-mail: _____

City: _____ Zip code: _____ Country: _____





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Payment :

Currency: _____ Sum: _____

Credit Card type: _____

Card number: _____

CVV (Card Security Code): _____ Expiration date: _____

Card holder's full name: _____

Signature: _____ Date: _____

Payments and Cancellations

1. These prices are granted to the first 120 persons to register. We cannot guarantee this price beyond the first 120 registrants.
2. Payments – by credit card only.
3. Payments can be made in Euros, US Dollars or ILS. Conversion rates will be calculated according to the exchange rate **on the date of payment.**
4. Payment is fully refundable for cancellation until October 15;
5. For cancellation from October 16 to November 9 – Refund of 50% from the total cost; Cancellation after November 10 – no refunds.

