



REGISTRATION FORM

Please complete the registration form below and return it to the IAP Secretariat via e-mail: sg@iap-association.org, by fax: + 31 70 36 30 367 or priority airmail.

Family name : _____

Given name : _____

Name of prosecution service/ employer _____

Position : _____

Address : _____

Tel : _____ Fax : _____

Email : _____

() Please debit my credit card (EURO 150,-)

[] Visa

[] Eurocard/MasterCard

[] American Express

Card Number: []

Expiry Date: [] [] [] [] [] [] [] []

IMPORTANT FOR ALL CARDS:

Card Validation Code (CVC) (3 last digits on the back of your card): [] [] [] []

Name of cardholder:

Signature: _____ **Date:** _____

() **I enclose a cheque** payable to “Treasury International Association of Prosecutors” EURO Bank account 45.82.16.623 with the ABNAMRO Bank at The Hague, The Netherlands, (swift code bank: ABNANL2A) for the sum of EURO 160,- (including EURO 10,- surcharge for banking charges).

() **I transferred** EURO 150,- to the Bank account IBAN NL65ABNA045.82.16.623, BIC code ABNANL2A, ABN/AMRO Bank, The Hague, The Netherlands.

Visit to the Special Tribunal for Lebanon (STL) or the International Criminal Tribunal for former Yugoslavia (ICTY) (subject to availability)

Please indicate whether you would be interested in attending either Tribunal during the afternoon of 3rd February 2012:

Yes

No