



COMPANION PROGRAM REGISTRATION FORM

EXECUTIVE SEMINAR BEHIND THE SCENES SEMINAR OF ISRAEL'S COUNTER-TERRORISM AND SECURITY OPERATIONS

February 19-26, 2011

Spouse First Name _____ Last Name (Print) _____

Accompanying (primary seminar participant) _____

Address _____ City, State, Zip _____

Country _____ Email Address _____

Phone _____ Fax Number _____

Please select one:

Package A - US\$2,675 Full Land Tour including guide, transportation, lunches and entrance fees. Also included are Welcome and Farewell dinner. Supplement hotel fees for additional occupant.

Package B - US\$590 includes Welcome and Farewell dinners. Supplement hotel fees for additional occupant.

Credit Card number _____ Card Expiration _____

Terms and Conditions: CANCELLATION: Chameleon Associates will refund your payment, less a 20% service charge, for cancellation received in writing 45 days before a seminar. There will be no refund or credit for cancellations received within 44 days of the tour. If a registered attendee does not cancel and fails to attend, this will be treated as a cancellation and no refund or credit will be issued. CHAMELEON ASSOCIATES SUBSTITUTIONS, CANCELATIONS AND POSTPONEMENT: Please note that the tour schedule was confirmed at time of publishing; however, circumstances beyond the control of the organizers may necessitate substitution, alteration or cancellation. As such, Chameleon Associates reserves the right to alter or modify the advertised schedule. Any substitution or alteration will be updated on our web page as soon as possible. Chameleon Associates is not responsible for any loss or damage as a result of a substitution, alternation or cancellation of an event. Chameleon Associates shall assume no liability whatsoever in the event this seminar is cancelled, rescheduled or postponed due to a fortuitous event, Act of God, unforeseen occurrence or any other event that renders performance of this seminar impractical or impossible. For this clause, a fortuitous event shall include, but not limited to: war, fire, labor strike, extreme weather or other emergency.

I have read and understood the terms and conditions mentioned above.

Name (Print) _____

Signature _____ Date: ___ / ___ / ___

PLEASE RETURN BY FAX TO: **(818) 734 8454**