



Credit Card \$

X	Please reserves	eat(s) at \$150 or reserve	_ table(s) at \$1,500
ALEF 2015	[] In addition, I/we would like	• •	d make a contribution as:
2015 ANNUAL LEADERSHIP EDUCATION FORUM	[] I/We cannot attend, but w of \$	ish to make a contribution ir	n the amount
2505/11/5/11/5/11	Total Payment Amount \$		
[] I/We are members of the 10th (Executive Committee Members	Anniversary Gala Celebration E receive two complimentary ticket		l be attending
NAME(S)			
SIGNATURE			
ADDRESS			
CITY		STATE	ZIP
HOME#	CELL#	WORK#	

] I attended The Hebrew University of Jerusalem

EMAIL

____AMEX ____DISCOVER ___VISA ___MASTERCARD ____PERSONAL ___BUSINESS

CARD # EXP. DATE /

Check Enclosed (Pavable to American Friends of The Hebrew University) \$

NAME ON CARD



For further information, please contact Laura Abrams at 561.750.8585 or email labrams@afhu.org.

SEATING REQUEST (lunch only)

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