

## IAT Law 2010 Registration Form

\_\_\_\_\_  
Name

\_\_\_\_\_  
Company/Firm

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Address 2

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email

\_\_\_\_\_  
Area of practice

\_\_\_\_\_  
DOB (optional)

---

*I would like to attend the following classes:*

- How to Gain Trial Victories (\$150)       Confidentiality Obligations (\$150)  
 Securities Law (\$150)                       Immigration Law (\$150)

*Please charge \$ \_\_\_\_\_ to my:*

Visa    MC    AMEX

\_\_\_\_\_  
CC#

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Signature

Or make checks payable to: IATL

**Mail to:**

The Institute of American and Talmudic Law  
3 West 57<sup>th</sup> Street, Ninth Floor  
New York, NY 10019

**Or Fax to:** (212) 302-2114

