



לשכת עורכי הדין בישראל
ISRAEL BAR ASSOCIATION
نقابة المحامين في إسرائيل

To:

**Israel Bar Association
Foreign Lawyers**

Via: Fax: 03-6912277/ Email: foreignlawyer@israelbar.org.il

Request to register for the Professional Ethics exam – April 2015

The registration form for the Professional Ethics exam to be held on **29 April 2015** must be submitted with a check for 160 NIS for exam fee no later than **22 April 2015**.

Name: _____

I.D/ Passport: _____

Address: street _____

No. _____

City _____

Country _____

Zip code _____

Phone: _____

Fax: _____

E-mail: _____

According to amendment No. 33 to the Bar Association law since 1961 and the Foreign Lawyers Regulations since 2012, I hereby request to register for the Examination in Professional Ethics Applicable to Foreign Lawyers.

Signature _____ Date: _____