

The Israel Association of Valuators and Financial Actuaries (IAVFA) is a professional organization, an institution for professional training and a body which specializes in placing professional employees in the financial sector in Israel. IAVFA strives to voluntarily regulate the professions of valuation and financial actuarial science in Israel, both by setting pre-qualification requirements, ethical principles for practitioners in these professions, and by training and certifying quality professionals for these professions. IAVFA provides both placement services in order to integrate its credentialed members in leading positions within the Israeli labor market, and mediation services between valuation consumers and valuation specialists.

# **Module Registration Application**

Please complete the information below (Print or Type): Your name and address exactly as you wish it to appear on your Certificate of Achievement or Certificate of Participation. To better serve you, IAVFA requests a curriculum vitae and a business photo (head shot) be submitted along with your application. This application is also available online at www.IAVFA.com

	Date:
SECTION A	
Member Information:	
Full Name:	
Designations held:	
Firm Name:	
Position in Firm:	
Firm's Website:	
Address:	
Country/State:	
City:	
ZIP:	
E-mail:	
Tel:	
Cell:	
Fax:	
Signature of Applicant*:	
*Your signature will authorize the Israel Association of Valuation	tors and Financial Actuaries
(IAVFA) to confirm the above information via e-mail and/or fax	x, if necessary, and authorize



information with third parties to secure confidentiality.

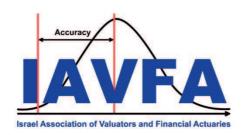
IAVFA to use either medium for future communication. IAVFA will not disclose or share this



SECTION B
I am a Member in good standing with IAVFA:
□ Yes
□ No
☐ Applying for Membership
SECTION C
Shipping Address: (If different from address above)
Firm Name:
Address:
Country/State:
City:
ZIP:
SECTION D
Home Address: (This address will not appear in any IAVFA publication. It will be used by
IAVFA if you change your place of employment and we are unable to obtain a forwarding
address and phone number)
Address:
Country/State:
City:
ZIP:
E-mail:
Tel:
Cell:
Fax:
SECTION F



☐ I have included a recent Curriculum Vitae or Resume with this application.



## **SECTION F**

<b>Education:</b>
High School Diploma:
University/College:
Degree:
Years Attended:
University/College:
Degree:
Years Attended:
University/College:
Degree:
Years Attended:
SECTION G
<b>Professional Licenses and Designations</b> :
Association:
Designation /License:
Designation/License #:
Year Certified/Licensed:
Association:
Designation /License:
Designation/License #:
Year Certified/Licensed:
Association:
Designation /License:
Designation/License #:
Year Certified/Licensed:
SECTION H
I am interesting in registering for the module:



#### **SECTION I**

#### **Policy Statement and Commitment:**

- I declare that all information I have given is correct and binding and that I hereby undertake to the following sections:
- I commit to transfer the full payment for the module, as outlined above.
- IAVFA's management is entitled to terminate the studies, for a failure to pay all or part of the tuition fee on time.
- I must give a written notice of cancellation of registration or cancellation of studies, and make sure the written notice was received. The date of receipt of the written notice is the valid date of cancellation of registration or cancellation of studies.
- I am aware that the opening of the module is conditional on a minimum number of participants
- I also know the cancelation conditions as listed in the table below:

Time for cancellation	Level of tuition charged
Until three weeks before the module starts	500 NIS (VAT included)
Two to three weeks before the module	25% of the tuition fee
starts	
One to two weeks before the module	50% of the tuition fee
starts	
Until a week before the module starts	75% of the tuition fee
Since the beginning of the module	Full tuition fee

- I cannot transfer the right to study to another person, without the written and explicit consent of IAVFA's management
- IAVFA's management has the right to stop the study in case of unbecoming conduct, or an interruption to the studies

Signature:	D	)ate: _	
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#### **SECTION J**

#### **REGISTRATION AND TUITION FEES:**

Registration fees are nonrefundable. However, if your application is not approved, your Tuition fees are fully refundable. Registration and Tuition fees are subject to change without notice. Please verify current rates with IAVFA Headquarters at (972) 77-50-70-590 before submitting your application.

Registration Fee		 . <u>500</u>	NIS (	VAT	included)
Tuition Fee		 4,500	NIS (	VAT	included)
TOTAL (Re sure to include application fee and membership a	dues )	\$			

#### **SECTION K**

### **METHODS OF PAYMENT:**

PAYMENT BY BANK TRANSFER

PAYMENT BY BANK TRANSFER

Bank Name: Bank Hapoalim B.M.

IBAN: IL32-0125-7200-0000-0489-498

Bank Number: 12 Branch Number: 572

Branch Address: 65 Jabotinski St., Rishon LeZion 7521819 Israel

Bank Account Number: 489498

SWIFT Code: POALILIT



By signing, you authorize IAVFA to charge your account for the amount indicated. IAVFA can also initiate credit entries to your account in the event a credit or correction is due. Your signature authorizes us to confirm the above information via e-mail or fax and to use either for future communications. IAVFA will not disclose or share this information with third parties.

Authorized Signature:	Date:
Aumorizeu Signature.	Date

# **RETURN APPLICATION VIA E-MAIL, FAX, OR MAIL TO:**

IAVFA—Israel Association of Valuators and Financial Actuaries

5 Nathan Branitzky St. • Rishon-LeZion • 7524205 Israel • IAVFA1020@GMAIL.com

Tel: (972) 77-507-0590 • Fax: (972) 153-77-507-0591 • Internet: www.IAVFA.com