



AMERICAN FRIENDS OF  
THE HEBREW UNIVERSITY

# NEXUS Mission to Israel

October 29 – November 2, 2017

## MISSION HIGHLIGHTS \*

- Welcome by Jerusalem Mayor Nir Barkat, HU alum, technology entrepreneur and venture capitalist.
- Gain access to the faculty and alumni of HU who are global leaders in **MEDICAL TECHNOLOGY, BRAIN SCIENCE** and **NANOTECHNOLOGY**.
- Meet with galvanizing industry leaders and **TECHNOLOGY** experts from **GOOGLE, WAZE** and **INTEL**, and tour their facilities. Explore Israel's role in leading smart mobility solutions and drone technology.
- Dine with the founders of **ORCAM** and **MOBILEYE**, the latter acclaimed as Israel's largest IPO ever.
- Meet HU's Vice President for Research and Development and the CEO of Yissum (HU's technology transfer company). Hear success stories and learn about what is in the pipeline in **AI, ENERGY, CLEANTECH** and **AGTECH**.
- Take a private tour of IDF Cyber Security Centre with the former commander of **IDF's Technology and Intelligence Unit 8200**, and learn how **CYBERSECURITY** is changing tomorrow's world.
- Be a guest at a "Pitch" session and hear first-hand about many promising new projects.
- Spend an afternoon at **Bravdo Winery** where the latest research in **BIOTECHNOLOGY** is applied to the winemaking process

## RESERVATION DETAILS

### PRICING for LAND ONLY \*\*

Standard Room	Double Occupancy	\$3850	<i>per person</i>
Executive Room	Double Occupancy	\$4150	<i>per person</i>

LAND ONLY PACKAGE INCLUDES: Hotel transfers to/from airport, portage at airport and hotels, luxury accommodations for 2 nights at **Mamilla Hotel Jerusalem** and 2 nights at **Hilton Tel Aviv**, all meals, point to point transportation, guide, programs, and miscellaneous expenses.

\* Itinerary details subject to change.

\*\* The quoted rates are per person and are based on a group size of 15 participants. Participants will be notified by AFHU in advance and in writing of any pricing changes. Arrangements for additional nights, touring, and upgraded accommodations are available through our travel agent.

## TO RESERVE SPACE

Complete the attached Reservation and Payment Form along with a non-refundable deposit of \$1,500 per person to AFHU by **August 25, 2017**.

## FOR MORE DETAILS

**Suzanne K. Ponsot (212) 607-8511 [sponsot@afhu.org](mailto:sponsot@afhu.org)**     **Jodi Popofsky (212) 607-8517 [jpopofsky@afhu.org](mailto:jpopofsky@afhu.org)**

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**RESERVATION AND PAYMENT FORM****PAYMENT INFORMATION** (A deposit of \$1,500 *per person* is due **August 25, 2017**. The balance is due **September 13, 2017**)☐ ENCLOSED IS A **CHECK** for \$ \_\_\_\_\_ payable to **American Friends of the Hebrew University**.☐ PLEASE CHARGE MY **CREDIT CARD** \$ \_\_\_\_\_ ☐ VISA ☐ MasterCard ☐ AMEX: ☐ Personal ☐ Business

Name(s) on card \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

**HOME ADDRESS:**

Street \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**BUSINESS ADDRESS:**

Company Name \_\_\_\_\_

Street \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**PASSPORT INFORMATION** (Please print clearly)**1ST PARTICIPANT:** \_\_\_\_\_

Name as it appears on your passport (First, Middle, Last)

Nationality: \_\_\_\_\_ ☐ Male ☐ Female

Place of Birth: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Passport #: \_\_\_\_\_ Expiration Date\*: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place of Issue: \_\_\_\_\_ Date of Issue: \_\_\_\_/\_\_\_\_/\_\_\_\_

**2ND PARTICIPANT:** \_\_\_\_\_

Name as it appears on your passport (First, Middle, Last)

Nationality: \_\_\_\_\_ ☐ Male ☐ Female

Place of Birth: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Passport #: \_\_\_\_\_ Expiration Date\*: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place of Issue: \_\_\_\_\_ Date of Issue: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\* PASSPORTS MUST BE VALID FOR 6 (SIX) MONTHS BEYOND DATE OF ENTRY****LIABILITY WAIVER**

By signing below, I/we affirm that I/we understand the risks associated with international travel and that American Friends of the Hebrew University "AFHU" is not responsible for any loss, damage or injury to any participant or any belongings of that participant caused directly or indirectly by AFHU suppliers or agencies, or by any airline, hotel, common carrier, travel agency, or any other person or entity not under AFHU's direct and sole control.

Participant: \_\_\_\_\_ 2nd Participant: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

(Signature required)

(Signature required)

**PLEASE REMIT COMPLETED RESERVATION AND PAYMENT FORM TO AFHU:**AMERICAN FRIENDS OF  
THE HEBREW UNIVERSITY**BY MAIL:**

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