



Jews Indigenous to the
Middle East and North Africa

INTERNATIONAL RIGHTS AND REDRESS CAMPAIGN – REGISTRATION CARD

The **INTERNATIONAL RIGHTS AND REDRESS CAMPAIGN** will record the family histories of Jews displaced from Arab countries and document the loss of individual and communal assets. Once collected, the documentation will be catalogued by a special unit in Israel's Ministry of Justice, established to compile the legal and factual basis necessary to assert the rights of Jewish refugees displaced from Arab countries.

ALL INFORMATION ON THIS REGISTRATION CARD WILL REMAIN STRICTLY CONFIDENTIAL

SECTION I. (TO BE COMPLETED BY PERSON FILLING OUT THIS REGISTRATION CARD)

Name	Address	City, State	Zip/Postal Code
Country	Home Phone Number	Cell Phone Number	E-mail Address
If you are filling this Registration Card out for someone else, what is your relationship to them:			

SECTION II. (FAMILY REGISTRATION)

FAMILY NAME:	FIRST NAME:	MAIDEN NAME OR OTHER:
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SECTION III. COUNTRY OF ORIGIN

ADEN	ALGERIA	EGYPT	LEBANON	LIBYA	MOROCCO	IRAN	IRAQ	SUDAN	SYRIA	TUNISIA	YEMEN
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Village, Town or City In Country of Origin?				Occupation?				Year of Departure?			
Where did person go after leaving country of origin?				How long did they stay there?				Where did they finally resettle?			

Please list any assets confiscated or abandoned in the country of origin.

<p>Family Assets (homes, business, property, bank accounts, pensions, etc.)</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>Communal Assets (synagogues, schools, cemeteries, mikvas, etc.)</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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Upon completion of this Registration Card, a full Registration Form will be sent to you or it may be downloaded at www.justiceforjews.com

Would you like a volunteer to help you fill out the full Registration Form?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Would you be willing to be interviewed about your family history/experience?	YES <input type="checkbox"/> NO <input type="checkbox"/>

Please fill out and mail this registration card to:

JIMENA 459 Fulton Street #207 – San Francisco, CA 94102
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