

PROGRAM FOR THE REPRESENTATIVES OF THE INTERNATIONAL LEGAL PROFESSION



Festivity of Sant Raimon of Penyafort 2014

Thursday, February 6th 2014

7.30 pm

Speaking competition “*Concurs Oratòria Amadeu Maristany*”,
organised by the Young Lawyers Group of the Bar

Session open to all the representatives of International Legal Profession

This event aims to showcase the speaking skills of the young lawyers of the Barcelona Bar Association. In this competition, the lawyers will be evaluated on their sense of humour, rhetorical abilities, legal imagination, creativity, and in general, on their legal education.

Friday, February 7th 2014

10.00 am

Mass in memory of the Lawyers who passed away in
2013

Sant Raimon de Penyafort Parish

12.00 pm

Meeting with the representatives of the twined Bars
Council room – 2nd floor Palauet Casades

Personal invitations have been sent by e-mail

01.0 pm

Civil Ceremony the Lawyers who passed away in
2013

Pati de Columnes - Columns Courtyard

05.30 pm Formal Session

Please note: This year we have changed the location of this event!

*Palau de Congressos de Catalunya
Av. Diagonal, 661-671*

Legal robe required

09.00 pm Dinner - cocktail
Palau de Congressos de Catalunya

Please note that this year it will not be a sitting dinner.

Saturday, February 8th 2014

10.00 am TROBADES DE BARCELONA
Memorial Jacques HENRY
*With the collaboration of the FBE (European Bars Federation)
8^t floor room, Mallorca, 283*



Subject:

“LAWYERS AND CLOUD COMPUTING: professional secrecy and data protection”.

01.30 pm Signing of the twining agreements with international Bars.
8^t floor room, Mallorca, 283

02.00 pm Cocktail-Lunch
Pati de Columnes - Columns Courtyard

04.00 pm Meeting with Presidents of International Bar Associations
Centre de Formació ICAB – Mallorca, 281

Subject: “EU legal regulation on professional services”



HOTEL RESERVATION FORM
Festivity of Sant Raimon de Penyafort
Il.lustre Col.legi d'Advocats de Barcelona
Barcelona, 06-08 Febrero / February 2014



Please return this form to: / Por favor envíe este formulario a:

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08037 Barcelona

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Please use capital letters to fill in this form / Por favor rellene este formulario con letras mayúsculas.

Family Name/Apellido _____ First Name/Nombre _____ Mr/Sr Mrs/Sra
Address/Dirección _____
Zip Code/Código Postal _____ City/Ciudad _____ Country/País _____
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HOTEL ACCOMMODATION / ALOJAMIENTO	Double Room single use	Double Room	Nights	Arrival Date	Departure Date
HOTEL MAJESTIC 5*GL http://www.hotelmajestic.es/	<input type="checkbox"/> 201,48 €	<input type="checkbox"/> 233,96 €			
HOTEL 987 4* http://www.987hotels.com/	<input type="checkbox"/> 132,11 €	<input type="checkbox"/> 145,42 €			
HOTEL CONDES DE BARCELONA 4* http://www.condesdebarcelona.com	<input type="checkbox"/> 139,81 €	<input type="checkbox"/> 158,62 €			
HOTEL CATALONIA BERNA 3* sup http://www.hoteles-catalonia.com/es/	<input type="checkbox"/> 100,21 €	<input type="checkbox"/> 112,42 €			

Room rates are in Euros per night per room, including service tax (currently 10% VAT), City tax and breakfast.
Las tarifas están expresadas en Euros, por habitación y noche incluyendo IVA 10%, Tasa Turística y desayuno.

TOTAL AMOUNT / IMPORTE TOTAL

_____ €

Important Note: Due to the high demand of hotel for the event dates, we would like to inform you that we cannot guarantee availability for reservations received after 9th January 2014, leaving these on request.

Four weeks before arrival hotel will charge one night, not refundable in case of cancellation and from the 24th of January any cancellation will be charged with the total amount.

Nota importante: Debido a la alta ocupación de los hoteles para las fechas del evento, le informamos que no podremos garantizar la disponibilidad de habitaciones para solicitudes recibidas después del 9 de enero de 2014, quedando éstas bajo petición.

Cuatro semanas antes de la llegada, el hotel cargará una noche, no reembolsable en caso de cancelación. A partir del 24 de enero, cualquier cancelación supondrá el 100% de gastos del importe total de la estancia.

Please indicate a second choice of hotel / Hotel Alternativo _____

PAYMENT - Credit Card / FORMA DE PAGO - Tarjeta de Crédito.

Please indicate your credit card details. This credit card information will be provided to the hotel as guarantee of the reservation. The full amount will be charged direct to the hotel at the time of check-out.

Por favor, indique los detalles de su tarjeta de crédito. Esta tarjeta será utilizada para garantizar su reserva en el hotel seleccionado. El importe total será cargado directamente en el hotel en el momento del check-out.

Visa Eurocard/MasterCard American Express Diners Club

Card Number / Tarjeta Número _____ Exp Date/ Caducidad _____

Cardholder's Name/Titular _____

Signature/Firma: _____