(Form No. 1 (regarding Art. 4)) \*For Individual Members

Date

/ / Year / Month / Day

To the Chairman of Miyako International Association

**APPLICATION FORM**

Please make sure you have read the articles of the Association and agreed to it before filling in the form.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| \*Name  (in Japanese or alphabet) | Surname | | Name | | |
| \*Address | Zip Code | | |  | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  | ― |  |  |  |  | | | |
|  | | | | |
| \*Date of Birth | / /  Year / Month / Day | Sex | | | Male / Female |
| \*Profession | □1. Elementary school / junior high school student  □ 2. High school student  □ 3. University student and other type of student  □ 4. Office worker / public servant  □ 5. Part-timer  □ 6. Self-employed  □ 7. Unemployed  □ 8. Other | \* Telephone | | | ―　　　― |
| Mobile phone | | | ― ― |
| E-mail | | |  |
| Do you want to receive information by e-mail? | | | YES / NO |
| Nationality | | |  |

**(Items with \* are required to fill in)**

|  |  |
| --- | --- |
| I agree to the articles of the Association to become a member | \*Signature |
|  |  |

＜Reserved for the secretariat＞

|  |  |  |  |
| --- | --- | --- | --- |
| Membership No. |  | □Restitution of ID card | |
| Received by |  | Type of ID card | Driving license / insurance card / student card / residence card / other |
| Input by |  | ID card No. |  |