

# Membership Application Form

For  
members

Please fill in this form in Block capital and paste your office card on it. You don't need to fill in several blank if it is written on your office card.

We highly protect your personal information.

---

---

N a m e

---

B i r t h d a y                                    /                                    /

---

C o m p a n y   n a m e

---

Company Add.                                    ZIP code: \_\_\_\_\_  
or  
 Home Add.  
\*Check one

---

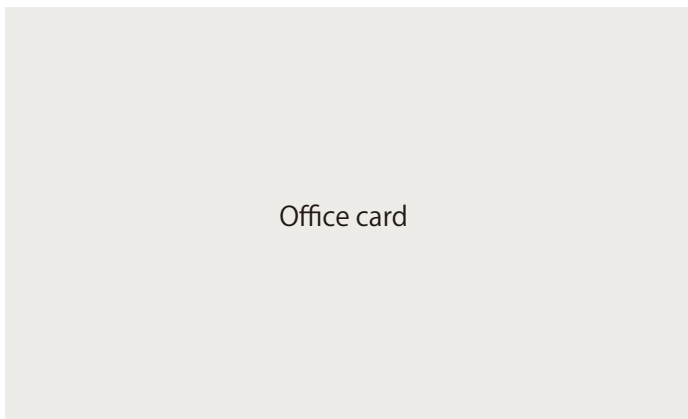
Telephone: \_\_\_\_\_                                    Cell phone: \_\_\_\_\_

---

E-mail1: \_\_\_\_\_                                    E-mail2: \_\_\_\_\_

---

※You have to fill "Cell phone","E-mail1"and"E-mail2" to apply for our membership.



Office card

※If you have any mistakes or not to paste your office card, your Application Form will be invalid.

Division	Contact person
Extra	

Le Club de Tokyo

In agreement with regulations, I apply for this membership.  
Furthermore, I observe not to declare any objections about result of checking your details and I procedure after admitting to be a member without delay.

Member

Signature

Date

/ /



Le Club de Tokyo