

FAX to 06-6447-4699

MEMBERSHIP APPLICATION FORM

Please fill in all the necessary items on this form in capital letters(※requisite).

※Application Date	YY	/ MM	/ DD
※Categories *	<input type="checkbox"/> Individual (¥3,000)	<input type="checkbox"/> Individual <Student> (¥2,000) **	
	<input type="checkbox"/> Associate (¥18,000)	<input type="checkbox"/> Corporate (¥100,000)	
※	Individual membership	Surname	
		First and Middle name	
		Date of Birth	YY /MM /DD
	Corporate membership	Corporate name	
		Name of a corporate representative	
		Name of an officer in charge	
※Address			
※Phone	()	-	
Fax	()	-	
Email	@		
※Way to join *	<input type="checkbox"/> Bank transfer	<input type="checkbox"/> Postal transfer	<input type="checkbox"/> Visit the NMAO (by Cash)
Member's info *	(Membership No. - -)		
	<input type="checkbox"/> Change category (current: → new:)		

* Please check the appropriate box

** If you apply STUDENT membership, please send a copy of your student ID card with completed this form by postal mail or fax.