Please type or block print the letter .

Application Form for the Sogetsu Teachers' Association
(New Member 新入会 / Reentry 再入会 / Renew 更新)

Membership No. _____

Name:
氏名 Mr./Mrs./Miss/Ms. _____

Address:
住所 _____

_____ Country: _____

Phone:
電話 _____ Fax: _____

Date of Birth:
E-mail: _____ 生年月日 _____

Flower name:
雅号(Gagoh) _____

Your teachers name:
親先生の氏名 _____

Grade:
資格 _____

Your promotion date:
昇格日 _____

☐ Teaching 指導あり
☐ Non-teaching 指導なし

Do you belong to any Branch or SG?
☐ Yes- _____ Branch / SG
☐ No

Membership dues to be paid:
維持会費 ¥_____ Year 年度: _____

＊Payment Method 支払い方法
(Please check the appropriate box .)
☐ Enclosed herewith: ☐bank draft ☐bank check ☐presonal check ☐cash
☐ Under separate cover: ☐International Postal Money Order
☐Postal Giro
(Account No. 00140-9-717263 Payable to SOGETSU FOUNDATION)
☐ Bank Transfer: (The Bank of Tokyo-Mitsubishi UFJ, Aoyamadori Branch
Account No.0873878 SOGETSU FOUNDATION)
☐ Credit Card: ☐Visa ☐Master

Expiry Date / 有効期限 : Month/月 ☐☐ Year/年 ☐☐☐☐

Credit Card No. / カード番号 :

☐☐☐☐—☐☐☐☐—☐☐☐☐—☐☐☐☐

Name On the Credit Card (PLEASE PRINT) :
カード名義人 _____
Signature :
カード名義人署名 _____

Please return this sheet to Services for Membership Department, Sogetsu Foundation.
7-2-21 Akasaka, Minato-ku, Tokyo 107-8505 Tel: 81(3)3408-1120 Fax: 81(3)3405-4947

Office Only (do not fill this out) / 草月会記入欄

用紙受付日 : _____ 承認番号 : _____ 入金日(承認取得日)_____