

クレジットカード支払い専用紙  
The Credit Card Payment Form

Date/日付 \_\_\_\_\_

Order Form for Sogetsu Leaflet  
草月リーフレット申込書

◆ Branch/SG Name: \_\_\_\_\_ Branch/SG

Mr./Mrs./Miss/Ms. Name/氏名: \_\_\_\_\_

Membership Number/会員番号: 

--	--	--	--	--	--	--	--

Address/住所: \_\_\_\_\_

\_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

◆ Order for/申し込み内容: :

Item	Price (¥)	# of Copies	Total Price (¥)
Leaflets for Exhibition /リーフレット (English) * Minimum order is 100 copies	1000 yen / 100 copies	100×	
Shipping (Please circle: Sea / Air )	Vary	N/A	
<b>TOTAL AMOUNT</b>			¥

Purpose/目的 (Please circle): Exhibition / Demonstration / Other: ( )

<Note> The shipment of 300 complimentary copies by sea mail, which sometimes takes up to three months, is free of charge to the Branch/SG. Shipping charges will be incurred for the orders from the Branches and SGs who would like to have the leaflets sent by airmail. Orders placed by individuals can be sent either by air/sea mail for a fee. The charges vary depending on the weight, so please ask us about the prices before sending the order form.

◆ Credit Card Details /クレジットカード情報 Credit Card/カードの種類:  VISA  MASTER

Credit Card Account Number/カード番号:

				-					-								
--	--	--	--	---	--	--	--	--	---	--	--	--	--	--	--	--	--

Expiry Date/有効期限: Month/月 

--	--

 Year/年 

--	--

Name on the Credit Card (Please print)/カード名義人: \_\_\_\_\_

Signature/カード名義人署名: \_\_\_\_\_

Please send this order form to: Overseas Affairs Department, Sogetsu Foundation

7-2-21 Akasaka, Minato-ku, Tokyo 107-8505, JAPAN

Phone: +81-3-3408-1151 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: \_\_\_\_\_ 承認取得日: \_\_\_\_\_

物品発送日: \_\_\_\_\_ 入金日: \_\_\_\_\_