

Application Form for Membership

NPO Kashiwa International Relations Association

Date:

Phonetic (katakana)			office use only	
*Name (Group Name)		Male	<u>Category of Membership</u>	<u>Group Individual Student Family</u>
		Female	<u>Type of Membership</u>	<u>Regular General Supporting</u>
* Address	〒 —			
* Phone/FAX			Email Address	
Age	the _____ ties	<input type="radio"/> I will attend a committee and work actively. <input type="radio"/> I will work when it is convenient to me. <input type="radio"/> I will join the events that I am interested in.		
What activities do you want to do?	<input type="checkbox"/> I'd like to interact with foreign people. <input type="checkbox"/> I'd like to make use of my experience and skills such as (_____) <input type="checkbox"/> I'd like to make use of foreign language I learned.		Languages that you can speak	Chinese, Korean, English, Spanish, Portuguese, French, German, Indonesian, Vietnamese, Thai
	<input type="checkbox"/> I'd like to support foreign residents of Japan. <input type="checkbox"/> others (_____) <input type="checkbox"/> Approval for the registration of membership			
<input type="checkbox"/> I'd like to attend the orientation for fresh members. (It will be held in the morning on first Saturday in odd month)				
Committee to Join (if you want)	General Committee, Multicultural Committee, Foreign Language Committee, Japanese Language Committee, Cross-Cultural Committee, Torrance Committee, Chengde Committee, Guam Committee, Camden Committee			

Please make sure to fill in the spaces marked *. KIRA would protect personal information with the utmost care.

Please refer to " the Guidance of the KIRA Membership".

Acceptant: