Application for Support Membership

Application Date (Day/Month/Year)	/	/	Member# (*No need to fill in)	
The Number of Units				
Total of Annual Fees Individual: 5,000yen/per unit Organizational: 10,000yen/per unit				yen
Name (Individual/Organization)				
$\operatorname{Address}$	Post / Zip	code :		
Country				
Tel				
E-mail				
Privileges (Please tick which you prefer.)			ushin (Tea Ma leaves (Appox	gazine written in Japanese) .50g)
Note				