



日本クラブ 個人/アソシエイト会員入会申込書
THE NIPPON CLUB INDIVIDUAL / ASSOCIATE MEMBERSHIP APPLICATION FORM

THE NIPPON CLUB
145 West 57th Street New York, NY 10019
Phone (212) 581-2223 Fax (212) 581-3332

氏名 (ローマ字) Name: (Last) (First) (Middle)

漢字氏名 Kanji: 生年月日 Date of Birth: / /

会社名 Company Name:

漢字会社名 Kanji: 役職名 (ローマ字) Business Title:

会社住所 Business Address: (Street) (Suite)

(City) (State) (Zip)

会社電話番号 Business Phone: () - ファックス番号 Facsimile: () -

自宅住所 Home Address: (Street) (Apartment#)

(City) (State) (Zip)

自宅電話番号 Home Phone: () - 電子メールアドレス e-mail Address:

*個人会員にお申込みの際には、現クラブ会員2名の署名を得ることが必要となります。

紹介者署名欄 (クラブ会員2名スポンサー)

Applicant for individual membership is required to obtain two sponsors' signature. They must be current Nippon Club member. Sponsors should be responsible for all unsettled debts incurred by the above applicant.

会員番号 Member No: 氏名 (ローマ字) Sponsor Name: 署名 Signature:

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*会員のご婦人の方へは、日本クラブ婦人部により定期的に情報をお送りし、各種活動にご参加いただけます。(登録費は不要)

婦人部登録インフォメーション Ladies' Club Information (no fee) ※ご婦人氏名 (ローマ字) Spouse Name:

趣味 (複数回答可)

ART BASEBALL BRIDGE CHORUS FILM/MOVIE FISHING GOLF
GOURMET/DINING IGO MAH-JONG MUSIC OPERA OUTDOOR PHOTOGRAPHY
READING/BOOKS SKIING SPORTS WATCHING TENNIS TRAVEL WINE/SAKE

Member card defray cost: Please note that you will be charged member card production fee \$3.00 on your first statement.

Withdrawal of Membership: It is agreed that the applicant may withdraw from the Club membership by submitting written notice to the Club. But the applicant's withdrawal shall not be accepted until all his indebtedness to the Club, including dues, is discharged.

I, the undersigned, hereby apply for membership in The Nippon Club.

申請者署名 Applicant's Signature: 日付 Date: / /

Official Use Only
MEMBER NO. : MAILED: APPROVED BY: