



Membership Application Form

Sri Lanka Automobile Association In Japan

Website: www.slaaj.com Email: info@slaaj.com

The information given on this form will be treated in confidence

APPLICANT

Title	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>
Designation	<input type="text"/>	Initials	<input type="text"/>		
Name	<input type="text"/>				
Date of Birth	<input type="text"/> YYYY	<input type="text"/> MM	<input type="text"/> DD		
Company Name	<input type="text"/>				
Address	<input type="text"/>				
Postal Code	<input type="text"/>				
Contact Numbers	<input type="text"/>	Telephone	<input type="text"/>	Mobile Phone	
	<input type="text"/>	Fax			
	<input type="text"/>		E-mail		
	<input type="text"/>		E-mail(Mobile)		

SUBSCRIPTION

Annual subscription fee payable in advance **30,000 Yen**

Payable to account no.

Bank Name	RESONA BANK LTD
Branch	KAWASAKI BRANCH
Account Type	FUTSU
Account Number	1715423
Account Name	SLAEAJ
Address Of The Bank	2-5-11, ISAGO KAWASAKI-KU, KAWASAKI-CITY, KANAGAWA PREFECTURE, JAPAN

TERMS

1. Subject to approval of the SLAAJ Committee
2. SLAAJ Committee reserves the right to appoint and remove members
3. Subscription fee will not be refunded under any circumstance

Signature