

Application Form for Supporting member

DATE: Y /M /D

To: Tetsuro Shimaguchi, Representative Director of General Incorporated Association CODE OF THE SAMURAI

I will apply for a supporting member of General Incorporated Association CODE OF THE SAMURAI .

Circle one	Corporate, Group OR individual		
Name			
Address			
Phone Number			
Representative Name	Tytle :	Name :	
Contacts	Department :	Name :	
	Tytle :	Phone Number : Email Address :	
Member Ship Fee	Special	Special member	Amount
		One time only	JPY
	General	General Member (Yealy)	Total Amount / Number
		30,000 JPY /1	JPY /
Name display on Website	Circle one	OK or NO	

The personal information you provide will be strictly and appropriately managed and will not be used for any purpose other than business.

【Bank Account Information】

SUMITOMO MITSUI BANKING CORPORATION (Bank Number : 0009) TOKIWADAI BRANCH (Branch Number : 672)

Beneficiary : CODE OF THE SAMURAI Ordinery Account Number : 7189988

三井住友銀行(0009) ときわ台支店(店番672) 普通 7189988

名義：一般社団法人 CODE OF THE SAMURAI

イッパ ンシャダ ンホウジ ンコード オブ ザ サムライ

General Incorporated Association CODE OF THE SAMURAI

PostalCode:173-0016

28-15-201,Nakaltabashi,Itabashi-ku,Tokyo JAPAN

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