



## Registration Form

### The 53rd-2010 JAPAN TAPPI Annual Meeting

6-8 October, 2010

Toyama Prefectural Institute, Toyama City

Name	
Position	
Company	
Address	
E-mail	
Telephone	Fax

**I wish to attend the JAPAN TAPPI Annual Meeting on** (please tick appropriate box)

Full Registration (Both Days)

Welcome Function only (Day 2 evening)

**Total Fee** (see general information)

Please complete the details above and send to:

**Naomi Izawa, JAPAN TAPPI, 9-11 Ginza 3-chome, Chuo-ku, Tokyo 104-8139, Japan**

**Tel: +81-3-3248-4841 Fax: +81-3-3248-4843 e.mail: izawa@japantappi.org**

#### **Payment Options**

Enclosed a bank draft payable to JAPAN TAPPI

Credit Card \_\_VISA \_\_Master

Card No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Cardholder's signature: \_\_\_\_\_

Remitted the total fee on (date) \_\_\_\_\_ by bank transfer to the following bank:

Name of Bank : Mizuho Bank, Ginza-chuo Branch

SWIFT BIC : MHBKJPJT

Account No. : 125-1139903

Account Name: JAPAN TAPPI

*\*\* Please indicate your name on the remittance*

**Signature** Date: \_\_\_\_\_ Signature: \_\_\_\_\_