

APPLICATION FORM FOR ADMISSION  
 入会申込書  
 Japanese Society for Tropical Agriculture  
 日本熱帯農業学会

Type of membership (Check one): 会員種別 <input type="checkbox"/> Full <input type="checkbox"/> Student <input type="checkbox"/> Foreigner <input type="checkbox"/> Organization <input type="checkbox"/> Supporting 正会員      学生会員      外国人会員      団体会員      賛助会員	
Nationality: 国籍	Date of Birth: 生年月日
Name: 氏名 _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: auto; margin-right: auto;"> <span>Family Name</span> <span>First Name</span> </div>	
Affiliation: 所属機関	
Mailing Address: 会誌送付先住所・機関名	<input type="checkbox"/> Office <input type="checkbox"/> Home
Postal Code:	E-mail:
Tel:	Fax:
(Student only) I verify that _____ is a student of the university. 上記人物は本学学生であることを証明します。 Expected date of graduation 卒業見込み年月日 _____ Date:                      /                      / Supervisor's affiliation and signature _____ 印 担当教員所属・氏名	
Payment: 支払い I am paying the membership fees for the year of _____, _____ yen <input type="checkbox"/> by postal transfer. (from Japan only) 郵便振替 <input type="checkbox"/> by postal money order. 郵便為替 <input type="checkbox"/> by bank transfer. 銀行振込 <input type="checkbox"/> by bank money order. 銀行為替 <input type="checkbox"/> in cash. (including registered mail for cash)現金(現金書留含む)	