Form No. 1

Year　　Month　　Day

Public Corporation The Hyogo Prefectural Center for the Elimination of Boryokudan
To the Director,

Applicant　　Address
Name　　Seal/Signature

Application for Registration

I hereby apply to become a registered member in support the objectives of the Public Corporation The Hyogo Prefectural Center for the Elimination of Boryokudan and to support its activities.

I (applicant business) also proclaim and confirm that we are not a anti-social organization such as Boryokudan or related to such entities.

Registration Details

1　Number of Accounts　　（　　Yen）

2　Applicant

Organization / Group	Name	
	Address	〒
	Representative （Birthdate）	Year　Month　Date
	Contact Info. （Contact Person）	TEL　（　　）　－ FAX　（　　）　－
Individual	Address	〒
	Occupation	
	Name （Birthdate）	Year　Month　Date
	Contact Info.	TEL　（　　）　－ FAX　（　　）　－

*Personal information collected with the application will be used for applying member benefits and operation management at the Center and will not be used for any other purpose.