


Application for funding Mikao Usui Sensei's Birthplace Stone Monument

(Groups)

(Please write in block letters.)

Groups Name			Date of Application	
			_____ day	_____ month
The representative's Name				
Office Address				
		Country		
Telephone Number				
Fax Number				
Contact Information 1	The person in charge			
	Mobile/Cell Number			
	E-mail address			
Contact Information 2	The person in charge			
	Mobile/Cell Number			
	E-mail address			
Transfer	AMOUNT	¥ _____		
			recipient's email gendaireiki.ass@gmail.com	
	(Please make a funding 30,000 yen or more.)			
	(Please bear the fees for remittance and exchanging currencies.)			
【Remarks】				

※: The following columns only for staff use. Entry is unnecessary.

管理者記入欄			番号	
受領日	ご入金	アクセス	式典参加	パーティ参加
〔ご意見・ご要望〕				