

## INDIVIDUAL MEMBERSHIP APPLICATION

NAME

MAILING ADDRESS (WILL BE PRINTED IN JASG DIRECTORY)

HOME TELEPHONE

BUSINESS ADDRESS

TELEPHONE

FAX

E-MAIL

CHECK APPROPRIATE MEMBERSHIP BOX

- |  |  |
|--|--|
| <input type="checkbox"/> PATRON \$100    | <input type="checkbox"/> YOUNG PROFESSIONAL \$45 |
| <input type="checkbox"/> INDIVIDUAL \$40 | <input type="checkbox"/> STUDENT \$10            |
| <input type="checkbox"/> FAMILY \$50     | TOMODACHI CLUB                                   |
|  | <input type="checkbox"/> INDIVIDUAL \$40         |
|  | <input type="checkbox"/> FAMILY \$50             |

TO BE COMPLETED BY THE JASG

MEMBERSHIP NUMBER

ENROLLMENT DATE

*Please send checks payable to:*

THE JAPAN-AMERICA SOCIETY  
OF GEORGIA, INC.

3121 MAPLE DRIVE

SUITE 224

ATLANTA, GA 30305

EMAIL: [JASG@MINDSPRING.COM](mailto:JASG@MINDSPRING.COM)

WEB: [WWW.JASGEORGIA.ORG](http://WWW.JASGEORGIA.ORG)



ジョージア日米協会