



Membership Application Form

Sri Lanka Automobile Exporters Association In Japan

Website: www.slaeaj.com Email: slaaj@gmail.com

The information given on this form will be treated in confidence

APPLICANT

| | | | | | |
|-----------------|--|-------------------------------|-------------------------------|--------------------------------|----------------------|
| Title | <input type="checkbox"/> Mr. | <input type="checkbox"/> Mrs. | <input type="checkbox"/> Miss | <input type="checkbox"/> Other | <input type="text"/> |
| Designation | <input type="text"/> | | | Initials | <input type="text"/> |
| Name | <input type="text"/> <input type="text"/> | | | | |
| Date of Birth | <input type="text"/> YYYY | <input type="text"/> MM | <input type="text"/> DD | | |
| Company Name | <input type="text"/> | | | | |
| Address | <input type="text"/> <input type="text"/> <input type="text"/> | | | | |
| Postal Code | <input type="text"/> | | | | |
| Contact Numbers | <input type="text"/> | Telephone | <input type="text"/> | Mobile Phone | |
| | <input type="text"/> | Fax | | | |
| | <input type="text"/> | | | E-mail | |
| | <input type="text"/> | | | E-mail(Mobile) | |

SUBSCRIPTION

| | |
|--|---|
| Annual subscription fee payable in advance | 30,000 Yen |
| Payable to account no. | |
| Bank Name | RESONA BANK LTD |
| Branch | KAWASAKI BRANCH |
| Account Type | FUTSU |
| Account Number | 1715423 |
| Account Name | SLAEAJ |
| Address Of The Bank | 2-5-11, ISAGO KAWASAKI-KU, KAWASAKI-CITY, KANAGAWA PREFECTURE, JAPAN |

TERMS

1. Subject to approval of the SLAEAJ Committee
2. SLAEAJ Committee reserves the right to appoint and remove members
3. Subscription fee will not be refunded under any circumstance

Signature