

IPA Secretariat use
Date Reception
Membership No.



## Membership Application Form

## (Student Member)

- Please fill in all required fields (\* mandatory).
- Please check the appropriate box.
- Please send the form to IPA Secretariat (E-mail: [tokyo@press-in.org](mailto:tokyo@press-in.org) ).

Application Date*			
Name*	Surname		Given Name
Gender*	F	M	country ( )

E-mail*	
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### Organization

Name*			
Dep./Sec.*			
Expected graduation year*			
Address*			
	Post code		
Phone*	Fax	Mobile Phone	

### Delivery address if the organization address is different

Address		
	Post code	
Phone	Fax	

★The copy data of Student card is necessary, please send the copy data with the application form.  
Student member is obliged to report to IPA on graduation.

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### International Press-in Association

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