%If you wish to pay by 「Yucho Direct」, 「Internet Banking」, 「Bank Transfer」, or 「Automatic Debit」, please inform us by sending this form.

## **FAX Transmission Sheet**

Date:

Please tick the box  $\square$  and fill the necessary information below.

## To: Nagoya University Alumni Association Bureau

 $_{\square}$  I have sent supporting membership fee to the designated  $\,$  (bank  $\cdot$  postal) account as follows.

FAX No.: 052-783-1920

$_{\square}$ I have sent contributions the designated	(bank • postal) account as follows.		
$_{\square}$ I wish to pay supporting membership fee	by automatic debit(from next fiscal years)	ear).	
□ Supporting Membership Fee			
☐ Supporting member (5,000yen/unit)		yen (	unit)
☐ Supporting cooperate member (	50,000yen/unit)	yen (	unit)
□ Contributions			
<ul> <li>Contributions</li> </ul>	yen		
<ul> <li>Beneficiary Name (or No.)</li> </ul>	of Alumni Association		
	[Sender]		
Address <del>T</del>			
Name			
Tel: ( )			
E-mail			
□ Graduate	The last year of enrollmen	 t	
	Undergraduate School • Gr		ool (Master · Doctor)
□ Professor Emeritus			
□ Former Faculty Member	The last affiliation	on	
·	Title		
□ Current Faculty Member	The last affiliation	on	
	Title		
□ Corporation	Name of Company		
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