

Application Form: Japanese Language Course

Student Type: <input type="checkbox"/> JAS Member (Ordinary / Associate) Member ID: _____ <input type="checkbox"/> Staff of Corporate Member Member ID: _____ <input type="checkbox"/> General public (Non-member)	Mode of Payment: <input type="checkbox"/> Charge to my JAS Member card <input type="checkbox"/> NETS <input type="checkbox"/> PayNow <input type="checkbox"/> Cheque payment attached Cheque No. _____
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Name: _____

Contact HP No: _____ E-mail: _____

Address: _____ (S) _____

New Student (or students that have not attended with us 6 months or longer)
 ★ Vehicle: Yes (Vehicle No. _____) No

Continuing Student (if you have taken Japanese classes with us before)

Applying for course level & Price (required) ★ **Class Name:** _____ (DAY: _____)

Course Fee (\$ _____)

	Early bird 15May~13Jun	Normal 14Jun~20Jun
<input type="checkbox"/> Basic :	• Mem: \$250.70 • Non-Mem: \$283.40	• Mem: \$272.50 • Non-Mem: \$305.20
<input type="checkbox"/> Intermediate :	• Mem: \$294.30 • Non-Mem: \$327.00	• Mem: \$316.10 • Non-Mem: \$348.80
<input type="checkbox"/> Pre-Advanced :	• Mem: \$337.90 • Non-Mem: \$370.60	• Mem: \$359.70 • Non-Mem: \$392.40
<input type="checkbox"/> Adv & Fur Adv :	• Mem: \$337.90 • Non-Mem: \$370.60	• Mem: \$359.70 • Non-Mem: \$392.40

By signing the following Acknowledgement, the applicant (or parent/guardian of, in case of applicants under the age of 18 years old) indicates that they have read, understood and agreed to all of the above terms and conditions. Kindly note that the course has a minimum age requirement of 15 years old.

I am below 18 years of age, and my parent / guardian is signing on my behalf.

ACKNOWLEDGEMENT
 I have read and understood the above Terms and Conditions and **agree to them.**

Name: _____ Signature: _____ Date: _____

Company's Approval (The following section is compulsory for staff of Corporate Members only)

Name of Company: _____

Corporate Membership No. : Z _____ Tel: _____ Fax: _____

Address: _____

The company approves the application of the above staff to attend the Japanese Language Course organized by the Japanese Association, Singapore.

Approved by: (Name) _____ (Designation) _____

Signature: _____ Company Stamp: _____

***Company Contact Person for Liaising Purposes (if different from above):**

Name: _____ Designation: _____

Contact No. : _____ E-mail: _____ @ _____

Application Date Received	Tick	Payment Type	Ref. No	Amount	Received By Staff	Receipt JAA No.	Chit No. & Issued By
	<input type="checkbox"/>	PayNow		\$			
	<input type="checkbox"/>	Nets		\$			
	<input type="checkbox"/>	Cheque #		\$			
	<input type="checkbox"/>	Member ID		\$			