

Application Form for JSCE Event

Please fill out this application form, then fax this form to 03-5379-0125 or email scanned form to "kawakami@jsce.or.jp".

Event	Code	60605	Name	Global Vision Lecture	Fee	per person: JPY														
Applicant	Name			Categ -ory (<input checked="" type="checkbox"/>)	<input type="checkbox"/> Member <input type="checkbox"/> Non-member <input type="checkbox"/> Student member <input type="checkbox"/> Student non-member	Member ID														
Affiliation					Section															
Address																				
TEL					FAX															
Email																				

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Once this application form is received, JSCE staff will contact you for the ticket and payment.

Inquiry:

Toru Kawakami
International Activity Center, Japan Society of Civil Engineers
Tel. 03-3355-5278 / FAX 03-5379-0125
Email: kawakami@jsce.or.jp