



Yes! Something can be done! We would like to help.

Japanese Social Services

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Fax: 416-385-7124

Email: info@jss.ca

Website: www.jss.ca

会員登録・更新および寄付金申請用紙

Supporting Membership Registration / Renewal and Donation Sheet

日付 / Date				
名前 / Name	Mr./Mrs./Ms./Dr./Rev. /Pr.			
	Mr./Mrs./Ms./Dr./Rev. /Pr. (for Partner)			
法人・非営利団体名 / Name of Corporation/Organization				
住所 / Address	Street			Apt. / Unit / Suite
	City	Province	Ontario / Quebec	郵便番号 / Postal Code
電話 / Tel	携帯 / Cell		電話 / Business	
E-Mail				

* 会費及び寄付金は免税の対象/Supporting membership and donations are tax deductible.

10ドル以上のお支払い金額に対しては、全て領収書を発行いたします。もし、領収書をご入用でない場合、次の欄にチェックを入れて下さい。Tax receipts will be sent for payments of 10 dollars or more. If you do not need to receive tax receipts, please check the following box.

不要/No

JSS 会費種別 (Supporting Membership Categories)

会費/Membership Fee

- | | | |
|---------------------------------|---|---|
| ❖ 個人会員/Individual Membership | <input type="checkbox"/> <u>1 Year</u> \$25.00 | <input type="checkbox"/> <u>2 Years</u> \$40.00 |
| ❖ 家族会員/Family Membership | <input type="checkbox"/> <u>1 Year</u> \$40.00 | <input type="checkbox"/> <u>2 Years</u> \$70.00 |
| ❖ 会社/Corporation Organization | <input type="checkbox"/> <u>1 Year</u> \$250.00 | |
| ❖ 非営利団体/Non-Profit Organization | <input type="checkbox"/> <u>1 Year</u> \$100.00 | |

お支払い金額/Amount of payment

In-Kind

寄付金/Additional Donation:

\$ _____

現金/Cash

合計/Total Amount:

\$ _____

小切手/Cheque

支払い先/ Payable To: **Japanese Social Services**

Charitable tax number: 133388710RR0001

◆ニューズレターにお名前を掲載してもいいですか？

May we publish your name as a member or/and a donor in our newsletter?

はい/Yes いいえ/No

◆ニューズレターは、どのような方法での受け取りを希望されますか？

How would you like to receive our newsletter?

- ウェブサイトで閲覧 / Read it on "www.jss.ca"
 - E-mail で連絡を受け取る (with E-mail notification)
 - 連絡不要 (No notification necessary)
- 郵送で受け取る / Receive it by Mail
 - 郵送/Mail