

KCA Thanksgiving Dinner Registration Form
(Fax to: 06-6228-0701)

Your Full Name: _____

Tel: _____ Fax: _____ E-mail: _____

KCA Member?

() Yes: 3,000yen () No: 4,500 yen

I wish to bring _____ guests.

*A KCA member can bring one spouse or friend for 3,000 yen fee.

_____member adult(s)	@ 3,000 yen per person	_____
_____spouse or friend	@ 3,000 yen per person	_____
_____non-member adult(s)	@ 4,500 yen per person	_____
_____member child(ren)	@ 2,000 yen per person	_____
_____non-member child(ren)	@ 2,500 yen per person	_____

Membership Renewal /
Become a Member @ 3,000 yen per person _____

Method of Payment:

() Bank Transfer () Cash Envelope TOTAL: _____yen

Name of member's spouse or friend:

Name(s) of guest(s):
