## APPLICATION FORM FOR MEMBERSHIP

Fax: +81-75-415-3662

Please type or print in block letters and check the box marked *check if you want to keep the item private		
	Title/Position:	
Name:		
	Middle Name (or Initial) , Family Name	
<b>*</b> ☐ Institution:		
* ☐ Mailing Address:		
	Country (	
<b>*</b> ☐ Telephone number:	*□ Fax number:	
* ☐ E-mail address:		
Fields of research (Please choose u	up to 6fields from the list and indicate your choice with number)	
(1) Reproduction (2) Growth/Nutrition (Biomembranes (8) Cell Walls (9) Organ Processes) (13) Primary Metabolism (14) Stress/Wound Response (19) Environme (23) Epigenetics (24) Plant- Microbe Interpretation (14) Plant- Microbe Interpretation (15) Plant- Microbe	(3) Differentiation/Development (4) Morphogenesis (5) Cell Cycle/Division (6) Senescence/Cell Dealelles (10) Cytoskeletons (11) Photosynthesis (Primary Processes) (12) Photosynthesis (Biosynthet 4) Secondary Metabolism (15) Enzymes (16) Response to Light (17) Response to Gravity (18) ental Response (20) Plant Hormones/Growth Regulators (21) Signal Transduction (22) Gene Regulators (25) Intracellular Protein Transport (26) Genomics (27) Proteomics/Metabolomics (28) Cell/Tissue Culture (31) Phytoremediation (32) Phylogeny/Taxonomy/Evolution (33) Ecology (34)	ic
Please check		
Membership type:		
☐ Regular JPY9,000	☐ Student JPY3,000	
Membership for:		
☐ Membership for this year	☐ Membership for the next year ☐ Membership for this year and next year	r
☐ A bill is required (a separate a	application form will be sent with the bill)	
* NEVER send a check because	cashing a check in Japan is as expensive as (or even exceeding) your payment its	elf.
Credit card: USA	☐ Master ☐ American Express ☐ JCB	
Card Number	Expiration Date	
Card Holder's Name	Signature (required)	
To qualify for student membersh	hip, the following statement must be completed by student's faculty advisor.	
I affirm that the person nam	ed above is a full-time student at	
Advisor's Signature	Date Title	

## Management of personal information

JSPP manages personal information with responsibility and uses personal information within an appropriate range for management of the society. Moreover, in order to make the management of the society smooth, personal information may be opened to the councilors. JSPP may deposit personal information required for business, when JSPP commissions a part of society's work to the affiliate companies. In addition, when disclosure, correction or deletion of personal information is requested,