



KOEKI SHADAN HOJIN
YOKOHAMA COUNTRY & ATHLETIC CLUB

Photos - 1 each

*photos may be taken at the Club

APPLICATION FOR MEMBERSHIP

Membership Type

- Full
 Junior
 Others (please specify) _____

Category

- Single
 Couple/Family

Office Use:

Member Number _____ Effective Date _____

- ID: Driver's License Passport Residence Card
 My Number Card Health Insurance Card

Applicant #1 Personal Information

| | | | | |
|-------------------|------------------|-------------------|----------------------------------|--------------|
| Applicant #1 Name | First Name _____ | Family Name _____ | DOB (dd/mm/yy) _____/_____/_____ | Contact |
| Address in Japan | _____ | | | Mobile _____ |
| | _____ Zip _____ | | | Email _____ |
| Nationality | _____ | | | Other _____ |
| Office Name | _____ | | | Tel _____ |
| Job Title | _____ | | | Email _____ |
| Office Address | _____ | | | |
| | _____ Zip _____ | | | |

Applicant #2 Personal Information

| | | | | |
|-------------------|------------------|-------------------|----------------------------------|--------------|
| Applicant #1 Name | First Name _____ | Family Name _____ | DOB (dd/mm/yy) _____/_____/_____ | Contact |
| Address in Japan | _____ | | | Mobile _____ |
| | _____ Zip _____ | | | Email _____ |
| Nationality | _____ | | | Other _____ |
| Office Name | _____ | | | Tel _____ |
| Job Title | _____ | | | Email _____ |
| Office Address | _____ | | | |
| | _____ Zip _____ | | | |

Child(ren)'s Personal Information

| Name(s) | DOB (dd/mm/yy) | Age | Gender | F | M | School |
|---------|-----------------------|-----------|--------|---|---|--------|
| _____ | DOB _____/_____/_____ | Age _____ | Gender | F | M | _____ |
| _____ | DOB _____/_____/_____ | Age _____ | Gender | F | M | _____ |
| _____ | DOB _____/_____/_____ | Age _____ | Gender | F | M | _____ |
| _____ | DOB _____/_____/_____ | Age _____ | Gender | F | M | _____ |

* The Club allows applicants and children to sign for consumption and will issue individual membership cards.

OTHER INFORMATION

Billing Information:

- Office (Attn: _____) Initial Fees Subscription fees Personal consumption
 Home Initial fees Subscription fees Personal consumption

Sign me up for: Parking Sticker Locker Club Newsletter

Referred to the Club by: Member _____

Company School Realtor/Relocation Agent Internet Website Advertisement Other _____

Sports & Recreational Interests (please tick the appropriate boxes):

Applicant #1

- Alley Bowling
- Baseball
- Basketball
- Billiards
- Cricket
- Darts
- Fitness Center
- Field Hockey
- Golf
- Judo
- Lawn Bowls
- Latin Dance
- Pickleball
- Rugby
- Scuba Diving
- Soccer
- Squash
- Tennis
- Table Tennis
- Yoga
- Volleyball
- Swimming
- Bridge/Mahjong
- Ikebana
- English class
- Others (please indicate) _____

Applicant #2

- Alley Bowling
- Baseball
- Basketball
- Billiards
- Cricket
- Darts
- Fitness Center
- Field Hockey
- Golf
- Judo
- Lawn Bowls
- Latin Dance
- Pickleball
- Rugby
- Scuba Diving
- Soccer
- Squash
- Tennis
- Table Tennis
- Yoga
- Volleyball
- Swimming
- Bridge/Mahjong
- Ikebana
- English class
- Others (please indicate) _____

Children

- Basketball
- Rugby
- Soccer
- Swimming
- Tennis
- Volleyball
- Gymnastics
- Ballet
- Summer Camp

DECLARATION

YC&AC PUBLIC LIABILITY POLICY: The Board of Directors would like to remind all individuals visiting the Club and taking part in Club sports and other activities that they are doing so at their own risk. The Club does purchase Public Liability Insurance to cover claims made against the Club in the event of injury to individuals caused by Club's negligence. This policy does not cover personal accident benefits or medical expenses for individuals while taking part in club activities on or off the Club premises. The Directors recommend that individuals should make their own insurance arrangements in order to cover themselves in the event of an accident while taking part in Club activities.

The Club reserves the right to use the photographs of members/guests which were taken in the Club.

I hereby apply for membership at the YC&AC and agree to obey the Articles of Association, By-Laws and other regulations of the Club from the date of application. By signing this form, I confirm that I have read and understand the above stated Public Liability.

I agree and support the objectives and activities of YC&AC.

Applicant #1 Signature _____ **Date** _____

Applicant #2 Signature _____ **Date** _____

This membership is considered valid only upon receiving signature from the Club Management.

Interview with Manager is completed on _____

Manager's signature _____