

寄付金申込書

Contribution Information

Date (mm/dd/yyyy)

Full name of Contributor

(寄付者氏名)

Address of Contributor

(住所)

Phone number of Contributor

(電話)

Amount of Contribution

_____ **US\$**

(寄付金額)

I make the above amount of a contribution for the improvement of Keio Academy of New York.

Sign
