

Japan-America Society of Indiana • 2014 Annual Gala

Thursday, May 22, 2014

Online Registration at: www.japanindiana.org

Name _____

Title _____

Company _____

Address _____

City/State/Zip _____

Email _____

Phone _____

**Please list the names of your guests on the reverse side
or send name list by email or fax before Friday, May 16.**

Patrons' Reception limited to Sponsor and Patron Guests.

パトロン・レセプションはスポンサー各位とパトロンで
お申込みいただいたお客様のみご参加いただけます。

Patron Corporate Table of 8 \$2,000 x _____ = \$ _____

Patron Individual \$250 x _____ = \$ _____

Corporate Table of 8 \$1,000 x _____ = \$ _____

Individual \$100 x _____ = \$ _____

Total \$ _____

Bill Credit Card VISA MC AMEX

Check Enclosed Please Send Invoice

Name on Card: _____

Credit Card #: _____

Exp. Date: _____

Billing Address: _____

I am unable to attend; however, I would like to
support the Japan-America Society of Indiana by
contributing a donation of \$_____.

**Please reserve by Friday, May 16.
No refunds after this date.**

Make checks payable and remit to:

JAPAN-AMERICA SOCIETY of INDIANA

39 West Jackson Place, Suite 50

Indianapolis, Indiana 46225

Tel: (317) 635-0123

Fax: (317) 635-1452

Email: admin@japanindiana.org

www.japanindiana.org

Please List Guest Names:

Name

Title

Company

Name

Title

Company

Name

Title

Company

Name

Title

Company

Name

Title

Company

Name

Title

Company

Name

Title

Company

Name

Title

Company