FAX to IIA (Iwaki International Association)　FAX 22-7609

Japanese Lessons Registration Form

Name		Family Name		Given Name	
	Katakana				
	Kanji				
	English				
Date of Birth		Month / Date / Year : / /		Age ( )	
Nationality & Hometown		Nationality		Hometown	
Gender		Male ・ Female			
Address		〒 (C/O)			
Contact Details		TEL		Mobile	
		Mobile phone e-mail address			
		PC e-mail address			
Work Contact Details					
		TEL		FAX	
Japanese Level (Please circle)		Introductory Level / Beginner (B) / Intermediate (I) / Advanced (A)			
		Speaking	Introductory / B / I / A	Listening	Introductory / B / I / A
	Hiragana	Reading	YES / NO	Katakana	Reading YES / NO
		Writing	YES / NO		Writing YES / NO
	Kanji	Reading	YES / NO	JLPT	Level ( )
		Writing	YES / NO		Passed in ( )
Japanese Study History		About years/months Where:		When did you come to Japan? Month/Year: /	
Reason for wanting to study Japanese					
Baby sitter ※ ☐ I need a baby sitter. ☐ not required		Child's Name : (English) (Kanji) Birthday and Age (Month/Day/Year) : / / ( ) Gender : Male / Female			
Preferred Placement Test Times		☐ 10:00～10:30 ☐ 10:30～11:00 ☐ 11:00～11:30 ☐ 11:30～12:00 ☐ Anytime		☐ not available on the day Available Day : Available Time : ※ (☐ not necessary)	
Office Use Only： ☐ A ☐ B ☐ C ☐ D		☐ 歩き ☐ 電車 ☐ 車(自分) ☐ バス ☐ 自転車 ☐ 車(送迎)			

※Parents are liable for insurance costs.

※People who have attended previous classes do not need to take a test to determine their level.