

Preregistration Form

W5YI-Sapporo VE Team

1. Please fill out each column plainly.
2. Please attach a photocopy your FCC license and /or valid CSCE
3. This form, photocopy, Exam admission and SASE should be sent as soon as possible

<i>Please put the mark to element of the exam that you want to take</i>			
Element 1	Element 2	Element 3	Element 4

Applicant Information (real information 日本国内情報)	
Last Name	Suffix
First Name	Middle Initial
Current Address	
Date of birth (MM/DD/YY)	
E-mail address	Phone
Current USA Callsign / Class (if any)	
Your mailing address in the States	

Do you have any valid CSCE ?	Yes	No	
If yes, What's element ?	Element 2	Element 3	Element 4
Issued Date (MM/DD/YY)	/	/	

Your HOME callsign (If any)

ふりがな 氏名	電話 :
ふりがな 〒 住所	

Date : _____

Signature _____

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Sample

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<i>Please put the mark to element of the exam that you want to take</i>			
Element 1	Element 2	Element 3	Element 4

Applicant Information (real information 日本国内情報)	
Last Name Saito	Suffix (Dr. or Sir. and any)
First Name Ryuichi	Middle Initial (If any)
Current Address 1-31 Nishi 11chome Minami22jo Chuoku Sapporo 064-0922 Japan	
Date of birth (MM/DD/YY) 01/01/1950	
E-mail address info@phase-sa.com	Phone 011-531-3515
Current USA Callsign / Class (if any) AA7AAA	
Your mailing address in the States c/o Yutaka Itsuno 16322 S Manhattan Pl Gardena, CA 90247-4640	

Do you have any valid CSCE ?	Yes	No
If yes, What's element ? element 1	Element 2	Element 3 Element 4
Issued Date (MM/DD/YY)	06 / 30 / 07	

Your HOME callsign (If any)	JA8EFI
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ふりがな 氏名	さいとう りゅういち 齋藤 龍一	電話: 011-531-3515
ふりがな 〒 住所	064-0922 北海道札幌市中央区南22条西11丁目1番31号	

Date : 06/30/07

Signature rsaito