



Life&Style Program  
 Swissotel Nankai Osaka  
 TEL:(06)6646-5043  
 FAX:(06)6646-5044

**Annual Membership Fee**

**Life & Style**

JPY77,000 (New)

Application Date : \_\_\_\_\_

Membership Application Form			
Name	Last Name:	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
	First Name:		
Date of Birth		Wedding anniversary	
Company Name		Position	
Address	<input type="checkbox"/> Business	Postal Code(      -      )	
	<input type="checkbox"/> Home		
Contact No.	Phone No. (      )      -	FAX No. (      )      -	
	Mobile No.      -      -	Priority	<input type="checkbox"/> Business <input type="checkbox"/> Home <input type="checkbox"/> Mobile
Email	@		
Survey	Any prefer beverage? <input type="checkbox"/> No <input type="checkbox"/> Yes ( <input type="checkbox"/> Wine <input type="checkbox"/> Champagne <input type="checkbox"/> Sake )		

-The customer's personal information filled in the application form will be used only for guidance from the Life & Style Office and Swissotel Osaka, and will not be used for other purposes.

Office field

決済	CRM	Mgr	領	優	仮	メイン本

NO \_\_\_\_\_

EXP \_\_\_\_\_

担当 \_\_\_\_\_

CONF.# \_\_\_\_\_

Credit Card	
Type	<input type="checkbox"/> VISA <input type="checkbox"/> JCB <input type="checkbox"/> Master <input type="checkbox"/> AMEX <input type="checkbox"/> Diners
Credit Card No.	_____ - _____ - _____ - _____
Expiry date	(      月 ) / (      年 )
Your Name	

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※The program office will call you directly to confirm your credit card number for security reasons.