

PTR ワークショップ 受講申込書

Select Workshop Standard Method(AD) / 10 & Under (10U) / 11to17 / Performance (PERF)

※Circle the one you attend.

Date of Application(yy/mm/dd): _____

No.

Last name				Head shot < 4 × 3 cm> Write name in the back and mail.		
First name						
Sex	M · F	Age				
Date of Birth	(yy/mm/dd)				Height	cm
Cell Phone	-	-			-	-
Mailing Address	(〒 -)					
Work for						
Work Address	(〒 -)				☎	- -
PC Email	Please identify 「-」 & 「_」, 「I」 & 「1」					
Mobile Email	Please identify 「-」 & 「_」, 「I」 & 「1」					
Tennis	yr	mo	Teaching	yr	mo	
Teaching Experience	~			(full-time · part-time) (full-time · part-time) <Use the backside for more information>		
Junior Teaching	yr	mo				
Junior Teaching Experience	~			(full-time · part-time) (full-time · part-time) <Use the backside for more information>		
Current Rating	AD	Teaching (), Skill (), Drill (), S/A (), Written () ※Fill in with initial: P, I, A, or F)				
	10&U	Teaching (), Skill (), Written () ※Fill in with initial: P, I, A, or F)				
	PERF	Teaching (), Skill (), Written () ※Fill in with initial: P, I, A, or F)				
Circle you need	BILL · RECEIPT		(address to:)			
Schedule of Payment	(yy/mm/dd)		(Mitsui Sumitomo · Yuucho)			
Transfer person (if not you)						
Lodging :	Y · N	Name of hotel :				