

Exhibit Application Form

This Exhibit Application Form must be returned to reach the Organizing Committee by September 28th 2010 at the address below:

Organizing Committee of JAPEX'10 at Japan Philatelic Society, Foundation

Mejiro 1-4-23, Tokyo 171-0031, JAPAN

Fax No. +81 3 5951 3315

| | | | | |
|---------------------------------|----------------------------------|----------------------------------|-------------|------------|
| Mr. <input type="checkbox"/> | Mrs. <input type="checkbox"/> | Miss <input type="checkbox"/> | Surname | First Name |
| Pseudonym | | | Telephone | |
| Address | | | E-Mail | |
| | | | Postal Code | Fax |

Title of the Exhibit

Short Description of your exhibit for the JAPEX Catalogue, and your favorite pages of the exhibit for the record of JAPEX. (Write on the back)

| Exhibition Class | Awards at previous exhibitions | | | | | | | | |
|--|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) (2) (3)@ (3)Ⓛ (4) (5) (6) | International | LG | G | LV | V | LS | S | SB | B |
| 1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> | National | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|----------------------|------------------|---|
| Dimensions of sheets | Number of frames | Exhibit will be delivered |
| Horizontally cm | | <input type="checkbox"/> By mail |
| Vertically cm | | <input type="checkbox"/> By exhibitor |
| | | <input type="checkbox"/> By other means |

For Philatelic Literature

Author:

Editor:

Publisher:

Year of publication:

Signature of Exhibitor

Signature:

Date:

