**Tester Application form - Atelier Mekaru Base 1 week rental plan.**

■Group/contact information

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| Family Name |  |
| First Name |  |
| Middle Name  (if applicable) |  |
| Group Name |  |
| Web site |  |
| Representative’s Name  (Family Name and First Name, Middle Name if applicable) |  |
| Staff/Personnel Name  (Family Name and First Name, Middle Name if applicable) |  |
| Phone number |  |
| E-mail |  |

※Atelier Mekaru Base will contact only staff/personnel by emails or telephones.

■Please fill in the desired usage.

Period of time：①7Days during February 24th(Mon), 2020 〜March 9th(Mon),2020

②7Days during March 25th(Wed),2020〜April 9th(Thu),2020

③7Days during April 20th(Mon),2020〜April 29th(Wed),2020.

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| --- | --- |
| First choice of schedule | , ~ |
| Second choice of schedule | , ~ |
| Third choice of schedule | ,　　　　 ~ |
| Example | February 24th ,2020 ~ March 1st 2020 |

※If you hope to use it more than 7days, please contact us. (at an extra cost and subject to availability)

※It is possible to use it for less than 7days at the same cost, without refund.

■Please fill in the organization profile, activity, policy, history, etc.

※You can attach existing materials separately. / Please expand the box below as required.

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■Please fill in about your motivation to apply and what you plan do during your stay.

※Please expand the box below as required.

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■Expected number of people

■Use of bedding　　Yes or No

■Message for Atelier Mekaru Base:

If you have anything we need to understand in advance, feel free to fill in.

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