

## Application Form

Please complete the following sections:

### I herewith join the EAJS as:

- personal member  
 associate member (for paid-up AAS members only; no voting right)  
 institutional member

**Sex:**  Male  Female

**Title:**  Professor  Doctor  other \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Family name:** \_\_\_\_\_

**Nationality:** \_\_\_\_\_

**Private address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail address:** \_\_\_\_\_

**Office address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail address:** \_\_\_\_\_

### Area(s) of study (please underline):

Anthropology, Archaeology, Architecture, Art, Performing Arts, Economics, Education, Ethnology, Gender Studies, Geography, History, Information Studies, Law, Linguistics, Literature, Medicine, Natural Science, Philosophy, Political Science, Psychology, Religion, Social Science, Sociology, other(s) \_\_\_\_\_

**Specific field(s) of study:** \_\_\_\_\_

### I agree that this information may be included in future EAJS publications:

yes  no

### I agree that this information may be forwarded to other institutions of Asian Studies:

yes  no

**Date:**

**Signature:**



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### Please return a printed and signed copy by fax or postal mail to:

Office of the European Association for Japanese Studies (EAJS), University of Frankfurt,  
c/o Chair of Japanese Economy, Mr. Per Larsen, Sophienstr. 44, 60487 Frankfurt/Main,  
Germany

**Fax: +49 (0)69-798288-66**

For security reasons, e-mails cannot be accepted.