Donation Application Form

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NPO Magokoro Organization for Childhood Cancer (MOCC)

To: President Nakagawara Akira

Donation Amount　　　　　　　　　　　　Yen

Bank Deposit Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like make a donation with the above details.

(Furigana)

Full Name

Address　〒

Tel

Email

About Posting Your Name on Our Website

Thank you for your kind donation. As a token of appreciation, we would like to post your donation details on our website. Please choose one of the followings:

□ Show name and donation amount

□ Show name only

□ Show ‘anonymous’ and donation amount

□ Do not show anything

Others