



# Geien Studio Application Form



Application date and time: \_\_\_\_\_

Corporate name: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

TEL: \_\_\_\_\_

Event			
Intended Use			
Organization or Sponsor			
POC		Affiliated post	
Contact Information	TEL:	Mobile:	Email:
Date and time of use	Date: Y ( ) M ( ) D ( )	Time	AM ~ AM PM ~ PM
Indicate desired area	Stage area	Studio area	
The number of People attending		The number of Chairs required	
Audio requirements	MD • CD player / DVD player / Large LCD tv		
Purpose / Note			

## GEIEN

1-8-18 Oroku, Naha-city, Okinawa, Japan

TEL: 070-5813-0171

Receptionist Stamp	Double Check Stamp	Payment processing Stamp