

Application for Banquet/Conference Room

Date of Application: _____

User Information

Name or Company Name	Member (Membership # _____ - _____) • Non-Member (please choose one)			
Department	Phone	FAX		
Person in charge	Mr./Mrs./Ms.	e-mail		
Address				

Details of Event

Date of Use	(MM/DD/YYYY)			
Time of Use	Banquet Rooms from _____ : _____ to _____ : _____ (hr:min) Seminar Rooms 9:00-12:00 / 13:00-17:00 / 18:00-21:00 / All Day			
Venue	<input type="checkbox"/> Iwasaki Koyata Memorial Hall <input type="checkbox"/> Kabayama-Matsumoto Room <input type="checkbox"/> Room 2 <input type="checkbox"/> Room 3 <input type="checkbox"/> Room 4 <input type="checkbox"/> Lecture Room <input type="checkbox"/> Seminar Room (<input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E) <input type="checkbox"/> Seminar Room (<input type="checkbox"/> 401 <input type="checkbox"/> 402 <input type="checkbox"/> 403 <input type="checkbox"/> 404)			
Purpose of Use				
Description of Display Board			Number of Attendees	
Contact Person on the date of event	Mr. Mrs. Ms.	Contact Person's mobile phone No		
Required Equipment				
Equipment to be brought by User	YES (_____) NO	Request for WiFi arrangement: YES NO		
Inquiry or Request				
Terms and Conditions	<input type="checkbox"/> I/We abide by the Terms and Conditions for Banquet/Conference Rooms, Seminar Rooms and Lecture Hall. <small>*Please read the Terms and Conditions and consent to it by checking the box above. Your request may not be accepted if you do not agree with it.</small>			

Reservation confirmation will be sent after this form is received by the I-House.

Banquet Division
International House of Japan, Inc.
5-11-16 Roppongi, Minato-ku, Tokyo 106-0032
TEL: 03-3470-4616 (10:00 am-7:00 pm) / FAX: 03-3470-3210