

Application Form for JKBooks

I submit the following application for use of the JKBooks provided by NetAdvance, Inc., for the following person(s)/organization, as responsible administrator, after having read and agreed to the "Terms of Use for JKBooks".

Date	_____ / _____ / _____ (YYYY/MM/DD)		
Application for the service(s) Please check service(s) you want	<input type="checkbox"/> Taiyo (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3		
	<input type="checkbox"/> Bungei Kurabu Meiji hen (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3		
	<input type="checkbox"/> Koyukai Zasshi		
	<input type="checkbox"/> Takita Choin Kyuzo Kindai Sakka Genkoshu		
	<input type="checkbox"/> Fuzoku Gaho		
	<input type="checkbox"/> Gunsho Ruiju (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3		
	<input type="checkbox"/> Bijutsu Shinpo		
	<input type="checkbox"/> Kobunso Taika Koshomoku		
	<input type="checkbox"/> Toyo Keizai Shimpo / Weekly Toyo Keizai Digital Archives [First phase] (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3		
	<input type="checkbox"/> Weekly Toyo Keizai Digital Archives [Second phase] (Complete Set) <input type="checkbox"/> set 4 <input type="checkbox"/> set 5 <input type="checkbox"/> set 6 <input type="checkbox"/> set 7		
	<input type="checkbox"/> Jinbutsu Soshu (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3 <input type="checkbox"/> set 4 <input type="checkbox"/> set 5 <input type="checkbox"/> set 6		
	<input type="checkbox"/> The ORIENTAL ECONOMIST Digital Archives (Complete Set) <input type="checkbox"/> set 1 <input type="checkbox"/> set 2 <input type="checkbox"/> set 3 <input type="checkbox"/> set 4 <input type="checkbox"/> set 5		
<input type="checkbox"/> Version up (Change media) Content(s) name : _____ *If you select " Version up," you need to send " User Register Card" to Yagi Shoten and be registered.			
Applicant (Administrator)	Institution		
	Name and title of representative		
	Address		
Contact Person	Name		
	Division, position	TEL	FAX
		E-MAIL	
Desired date of start of service	_____ / _____ / _____ (YYYY/MM/DD)		
Billing Address	<input type="checkbox"/> same as applicant above <input type="checkbox"/> same as system administrator above <input type="checkbox"/> different person (fill in spaces below)		
	Address		
	Division, position		
	Person in charge		
Number of accesses	4 Simultaneous Access is provided as a basic service. If more access is needed, Please ask.		
Access Method	<input type="checkbox"/> IP Address *Please write down IP address correctly		
	<input type="checkbox"/> ID/Password ※Please fill in desired ID and password below		
	●ID: 1st _____ 2nd _____ 3rd _____ ●Password: _____ *password must be from 5 to 10 characters in length		
Remarks			