

Date (Day/Month/Year): \_\_\_\_\_

To the Mayor of Hiroshima:

Address \_\_\_\_\_

Name (Last, First) \_\_\_\_\_

Group/Association Name \_\_\_\_\_

Representative (If group/association)

Name (Last, First) \_\_\_\_\_

Title \_\_\_\_\_

**Paper Crane Request Form**

We would like to carry out an event to transform and honor the thoughts entrusted to the paper cranes, for which we request the distribution of paper cranes as indicated in the attached documents.

1 Project Name:

\_\_\_\_\_

2 Project Organization

|   |  |
|---|--|
| Organizer/Group or Association Name                       |  |
| Representative's Name and Title (if group or association) |  |
| Contact Person's Name and Title (if group or association) |  |
| Address   |  |
| Contact details   | TEL  |
|   | FAX  |
|   | E-mail   |
| Group or Association Description                          | As described in attached document(s) (group or association description, outline of activities, etc.) |

3 Attached documents

- (1) Project Planning Form (Form 2)
- (2) Additional reference document(s)