

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)