

MOKUHANGA INNOVATION LABORATORY (MI-LAB)
Lake Kawaguchi Artist-In-Residence Program
CfSHE Short Workshop Program

MAILING ADDRESS REGISTRATION FORM

Family Name:	First Name:
Nationality:	<input type="checkbox"/> Male <input type="checkbox"/> Female
E-mail address:	
Your belonging organization (if applicable):	
In which program are you interested? <input type="checkbox"/> Basic Training program (Self-supported program) <input type="checkbox"/> Advanced program (Self-supported program) <input type="checkbox"/> 3 / 4 / 5 days workshop at CfSHE Gallery (Self-supported program)	
In which year do you want to participate? <input type="checkbox"/> 2020 <input type="checkbox"/> 2021 <input type="checkbox"/> Other:	
Please describe why are you interested in water based woodblock printmaking and printmaking study/work experience if you have.	

* Please send this form by email to: infodesk@endeavor.or.jp