

Signature:

MEMBERSHIP WITHDRAWAL CHANGE OF PRIMARY MEMBER NOTIFICATION



- 1. Please fill out the form and mail or fax it to JAL Family Club Desk.
- 2. Please also make sure to provide Primary Member's name, membership number and signature, and keep a copy of this form for your records.
 - <NOTE> You do not need to fill out this form if your reason for withdrawal is one of the following:
 - ♦ If you relocate to Japan: After moving, please notify JAL Family Club administrative office in Japan (03-5460-3999).
 - ♦ If you relocate outside of the American region (except Japan): After relocating, please notify your nearest JAL Family Club Desk.

WITHDRAWAL OF ENTIRE FAMILY (Please	check even if you are the sole member.)
☐ Entire family would like to withdraw (You	r membership will be automatically transferred to JAL Mileage Bank. No membership fee will be charged.)
CHANGE OF PRIMARY MEMBER	
**Please choose a new Primary Member from curr	rent Family Members.
New Primary Member's Name:	Membership Number:
Home Address:	
Home Phone:	Home Fax:
e-mail Address:	
Company Name:	
Your Department:	Business Title:
Company Address:	
Business Phone:	Business Fax:
Mailing Address:	Preferred Language: Japanese English
WITHDRAWAL OF FAMILY MEMBER	※ Copy this if you need extra application * Copy this if you
☐ Family members withdrawing (Your members	ship will be automatically transferred to JAL Mileage Bank. No membership fee will be charged.)
Family Member's Name:	Membership Member:
Family Member's Name:	Membership Member:
Family Member's Name:	Membership Member:
PRIMARY MEMBER	R'S SIGNATURE
Primary Member's Name:	JAL FAMILY CLUB DESK
Membership Number:	300 Continental Blvd., Suite 40 FL Segundo, CA 90245

Date:

FAX: 310-414-0149