**Application for Asian Pacific Federation of Coloproctology　(For Society and Individual)**

**Country:**

**Name of your society**

**Year of establishment of your society：**

**Number of members：**

**Name of President or Individual:**

**Contact address:**

**E-mail address:**

**FAX:**

**Tel:**

Send to　Secretariat　of APFCP

**Secretariat for the Asian Pacific Federation of Coloproctology**

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