

PASSPORT RETURN ADDRESS FORM & RELEASE OF LIABILITY JAPAN CENTER FOR MICHIGAN UNIVERSITIES

International Center 427 N. Shaw Lane, Rm. 5 East Lansing, MI 48824 TEL: (517) 355-4654 jcmu@msu.edu http://jcmu.isp.msu.edu

Please indicate the address to which you would like your passport to be returned. Be sure to fill out the following information COMPLETELY to ensure proper delivery. (NOTE: Passports cannot be returned to a PO Box).

Full Name:			
Street Address:		Apt:	
City:	State:	Zip:	
County / Province:	Country	:	
Preferred Contact Phone:			
Preferred Contact Email:			
Is the above return address located in	MACOMB, OAKLAND, o	or WAYNE county ii	n Michigan, USA?
○ Yes* ○ No			
*If your stated return address is in Macoml pick up your passport from the Consulate of You will be notified by their office when you	General of Japan's office a ur passport is ready for pion	at the Renaissance C ck-up.	enter in Detroit, MI
Find directions and parking information for website: http://www.detroit.us.emb-japan.g		v.gmrencen.com or vi	sit the consulate's
RELEASE OF LIABILITY			
l,(Full Name - Print)	_, affirm that I will NOT hol	ld the Japan Center f	or Michigan
Universities (JCMU) or its employees resp			
facilitating my visa application.			
DATE:			
(Month / Day / Year)		Signature	