

send FAX to : +81-3-5937-6727

To: i-Pairs Inc.



## Application form for Japanese Narration Service

Corporate       Individual

Application date	/ / (YYYY/MM/DD)
Contractor name (Company Name)	Signature (Company Seal)
Contractor Address	
	Country ( )
Name of person in charge	Department
	Name
Contact info	TEL :
	FAX :
	Email to deliver :

Billing Info	<input type="checkbox"/> Same as contractor information above <input type="checkbox"/> Others (Please fill-in below)	
Billing to	Signature (Company Seal)	
Billing Address		
	Country ( )	
	Department:	
	Name:	
	TEL:	
	FAX:	
	Email:	

■ Application Plan

■ Custom Plan	
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Announcement manuscript	<input type="checkbox"/> It has already been sent as a separate e-mail attachment. ■ Email address to send the manuscript : <a href="mailto:voice@i-pairs.co.jp">voice@i-pairs.co.jp</a>
Insert BGM	<input type="checkbox"/> Yes <input type="checkbox"/> No BGM Title of i-Pairs BGM sound library : _____
Number of file divisions	Total number of file divisions : _____ Files
Estimation Number	Please enter the estimation number from i-Pairs Inc. No. : _____
Name of nominated narrator	Please enter the nominated narrator Name of the narrator : Rank I ・ II ・ III / _____
Delivery method	■ Email with download link
File Format	<input type="checkbox"/> WAVE (44.1kHz 16bit) <input type="checkbox"/> AIFF (44.1kHz 16bit) <input type="checkbox"/> MP3 <input type="checkbox"/> Other ( _____ )
Specify the number of seconds	If there is a specification of the number of seconds per file, enter it. specified number of seconds : _____ seconds/file
Remarks	(If you are in a hurry, please write your desired delivery date) *Special express charges may apply.

\* We may use the announcements that we have created as examples of our introduction.

\*Please note that cancellation after placing an order is not possible, and in that case the full estimated amount will be charged.