

# PASSWORD RESET APPLICATION FORM

Date of application: \_\_\_\_\_

## 【Member Information】

|                   |  |
|-------------------|--|
| Membership Number |  |
| Company           |  |

|      |  |
|------|--|
| Name |  |
|------|--|

|         |   |
|---------|---|
| Address | 〒 |
|         |   |

|  |     |
|--|-----|
| Day-time contact number  | — — |
| Contact type: 1. Work 2. Home 3. Mobile 4. Other (Please choose one) |     |

Please check the applicable service

WELBOX

incentive-plus

## Notification

### HOW TO FILL IN A FORM

- ・Please fill in all blank of the form.
  - ・We will send your temporary password by mail. Please write your correct address.
  - ・「Membership Number」starts from 4 letters code.Please write all number. e.g) 1000-123456、1000-123456-002
  - ・If we would like to ask you something, we will call you. Please write your Day-time contact number.
- Please note that if we are unable to contact you for a few days, we may have to return the documents.  
Thank you for your understanding.

### HOW TO SEND

- ・Please send to the following “WELBOX Center Address”.
- (Shipping costs will be carried by the WELBOX members. Email or fax cannot be accepted.)

### ABOUT TEMPORARY PASSWORD

- ・“Your temporay password” will be sent to your delivery address in about a week after we receive the lost and found form.
- Shipping style: regular post delivery
- Please understand that we cannot change the shipping style or guarantee on the arrival date.

## WELBOX Center Address

〒683-0004

Tottori-ken,Yonago-shi, Kamifukubara 1383-4

「EWEL WELBOX Center temporary password reception desk」