

Minokamo City After School Children's Club Usage Application Form  
美濃加茂市放課後児童クラブ利用申請書

\_\_\_\_Year \_\_\_\_Month \_\_\_\_Day

To the Mayor of Minokamo City

I want to avail of the  Hokago Jido Club service, therefore I am submitting this application along with the related documents.

Address	Minokamo shi					
Furigana						
Parent's Name						
Tel. no.1		Relation		Tel.no.2		Relation

\* If we need to contact you, we will call Tel.no.1 first.

Desired Plan  (Mark your selection with a circle.)		① Whole Year (No Saturdays) <small>( Including Summer vacations )</small>		② Whole Year (With Saturdays) <small>( Including summer vacations )</small>
		①' Whole Year (No Saturdays) <small>( Excluding Summer vacations )</small>		②' Whole Year (With Saturdays) <small>( Excluding summer vacations )</small>
		③ Summer Vacation Only <small>(No Saturdays)</small>		④ Summer Vacation Only (With Saturdays)
		⑤ Spring, Summer and Winter Vacations Only <small>(No Saturdays)</small>		⑥ Spring, Summer and Winter Vacations Only <small>(With Saturdays)</small>

( Furigana)			School Name and Year Level		for FY 2024 School Year <div></div> Elementary School, Grade <div></div> <small>(Currently: <div></div> Grade / <div></div> Nursery/Kindergarten)</small>	
Name of Child			Date of Birth			
Date of Birth	Year	Month	Day			
Employment/ Education Status of all Family Members Living in the Same House ( Including those who are in a separate household )	Name	Relation	Date of Birth	Occupation/School, etc.	Arrival Time at Home	
			Year    Month    Day			
			Year    Month    Day			
			Year    Month    Day			
			Year    Month    Day			
			Year    Month    Day			
Desired Entrance Date	Year	Month	Day	Authorized person for pick up <small>N a m e</small>	Relation	Pick up time
Check the	Living status of grandparents living separately	<input type="checkbox"/> Living within the city, etc.(Address: _____ ) <input type="checkbox"/> Living outside the city				
	Reason for Use	<input type="checkbox"/> Work, Attending school or Undergoing Technical Training <input type="checkbox"/> Pregnancy/Giving Birth <input type="checkbox"/> Illness/ Caregiver/Nursing <input type="checkbox"/> Others				
	Food allergies (Yes/No)	<input type="checkbox"/> Yes (Does he/she require an Epipen? Yes / No) <input type="checkbox"/> No    Child Health Condition: <input type="checkbox"/> Good <input type="checkbox"/> Not Good				
Persons eligible for childcare fee reduction/exemption		<input type="checkbox"/> Not applicable <input type="checkbox"/> Applicable ( <input type="checkbox"/> Welfare <input type="checkbox"/> Tax exempt household <input type="checkbox"/> School Expenses Support)				
If you have any worries or concerns regarding your child's health / lifestyle, mental and physical condition please write them down.		(Please write down the details of the child conditions such as allergy and diagnosis, etc. as much as possible )				
Do you have a Certificate of Employment? (Only if applicable)		If you have already submitted documents with a Certificate of Employment (proving the need for childcare) issued within 3 months such as Siblings' "Education/Childcare Current Status Report", "Approval Form for Admission or Change of details in Nursery School / Enrollment Form for Nursery School "; please put a circle in the box to the right. (Additional documents may be requested.) <div></div>				

Terms of Commitment (誓約書兼同意書)

- ① I will pay the After School Children's Club nursery fees by the designated payment deadline.  
② If I am contacted because my child cannot stay in the club due to illness, injury, etc., I will pick him or her up as soon as possible.  
③ If we no longer meet the criteria for using the club, I will submit a Cancellation Notification and stop using the service promptly.  
④ I understand and will abide by the instructions stated in the *Checklist: Things to Consider* to ensure the proper management of the After School Children's Club.  
⑤ I consent to the sharing of personal information between the club and his or her elementary school.  
⑥ I understand and agree to the sharing of information held by nursery schools, children's centers, kindergartens, and other specific education/ nursery facilities, etc., regarding application for after-school children's club.

Parent's Name and Signature: \_\_\_\_\_

美濃加茂市使用欄 (To be filled-up by Minokamo City personnel)

受付印	確認	確認2	受付簿	前年度	入力	兄弟姉妹	可否	クラブ連絡	保護者	備考
				有・無		有・無	許可・待機			