## Application form for the acceptance of children

ochile	ochildren's information					
	grade	class	name			
	grade	class	name			
	grade	class	name			
	grade	class	name			
	grade	class	name			
∘Rea	son for app	lication				
Γ						
L						

For the acceptance of children at schools and/or kindergartens, I declare the following.

- I take fever and check physical condition of the child/children every morning.
- If there is any health problem of the child/children, I do not make the child/children go to schools and/or kindergartens.
- The commute to schools and kindergartens is in my charge.
- I make the child/children bring lunch.
- I make the child/children wash their hands often and well, wear masks and follow hygienic practice.

•	I am available	for	emergency	contact	from	schools	and/or	kindergart	ens
	Tel No.	(				)			

Guardian's Name	Stamp
	<del>-</del>

## [Dates and Hours]

Month	Date	Day	Hours	Remarks
4	15	Wed	~	
4	16	Thu	~	
4	17	Fri	~	
4	20	Mon	~	
4	21	Tue	~	
4	22	Wed	~	
4	23	Thu	~	
4	24	Fri	~	
4	27	Mon	~	
4	28	Tue	~	
4	30	Thu	~	
5	1	Fri	~	