

Nishi Ward Child Nurturing Support Center "Smile Port"

スマイル・ポート



Registration Form

A name of child		male or female	The date of birth
		girl / boy	dd/mm/yyyy
mother or father's full name (the one that is accompanied by mainly)		Relations with the child	
		mother / father / grandmother / grandfather / others ()	
address	〒 -		
home phone No.		Mobile phone No.	

<p>How did you know "Smile Port"?</p> <ol style="list-style-type: none"> Public information paper, the handbill of a city / the ward The homepage of a city / the ward The introduction of the ward office / welfare health center The homepage of "Smile Port" From a friend / an acquaintance Private information magazine When you passed Smile Port and knew it. Others () 	<p>The main transportation to "Smile Port"</p> <ol style="list-style-type: none"> on foot by bicycle by bus by train by car Others ()
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A free entry column (please let us know your special ability, favorite things and hobbies.)
 For example: handicrafts / foreign language / cooking (sweets...)/ yoga hula / read picture book / musical instrument performance / editing - others anything ...

* I use this information for the urgent communication of grasp / the user of the use situation of "Smile Port". I manage the personal information that had you offer it severely and show it to the third person unless emergency is special without obtaining its consent.
 * Based on the contents which had you fill out an application, I make "a registration card".
 (The publication charges are free of charge)
 When it is used an open space, please show it to a receptionist by all means.

I confirm above contents and agree that I register myself. A signature

スタッフ記入欄	
入力者印	確認印