

Form No. 1

Application for Issuance of Sanda City Help Mark / Help Card

Year\_\_\_\_\_ Month\_\_\_\_\_ Day\_\_\_\_\_

To Mayor of Sanda City

Applicant (person who uses Help Mark / Help Card)

Address : \_\_\_\_\_

Name : \_\_\_\_\_

Telephone number : \_\_\_\_\_

I apply for issuance of Help Mark / Help Card.

Request for issuance	Help Mark (with strap)      Help Card ※Circle the one you request. (You can circle both).
If an agent fills an application	<u>Name of the agent</u> : _____ <u>Relationship with the applicant</u> : _____ <u>(Contact telephone number)</u> : _____
Note	

- ① Help Mark / Help Card is issued only one piece per person.
- ② Come to the counter or apply by mail, FAX, or e-mail. We cannot accept the application over the telephone.
- ③ Personal information written on the application is only used for management of Help Mark / Help Card, and will not be used for other purposes. However, the statistically processed information such that a person to which the personal information belongs cannot be identified may be published.

※The following entry column is to be filled by staff at the counter.

Date of issuance	Year_____ Month_____ Day_____
Note	