

**Example**

(Submission) Parent→School→Board

of Education

Form 1

**For Children**

YYYY20○○MM○○DD○○

Application for Higashihiroshima City School Meals

To the Mayor, Higashihiroshima City

Parent, etc. 〒739-8601

(Person with duty to pay) Address ○-○ Saijo Sakae-machi, Higashihiroshima City

Furigana さいじょう たろう

Name Saijo Taro (印)

Telephone (Home Mobile Other ( ))

090-1111-2222

I wish for my child to receive school means, and as such I hereby apply for school meals according to the stipulations of Clause 3 of the Ordinance Regarding the Collection of Fees for Higashihiroshima City School Meals, and having consented to the Points to Note and Items of Consent below.

Details of the child who will receive the school meals	School name	Higashihiroshima City Municipal	Elementary School Saijo	Grade	Nencho <sup>△</sup> · Nencho	
	Date of birth	Date: ○○YYYY ○MM ○DD				
	Furigana	さいじょう じろう			Sex	
	Name	Saijo Jiro			M · F	
	Address	① 〒 -			② Same parent/guardian as	
	Start date	From YYYY MM DD				
	Payment method	<input checked="" type="checkbox"/> Bank account transfer <input type="checkbox"/> Payment slip				

**【Points to Note】** · This application form will continue to be used from while your child is in a municipal elementary school in Higashihiroshima until he/she graduates from a municipal junior high school (or until he/she moves to a school other than a municipal school). For a child at a municipal kindergarten, this form will continue to be used until the child leaves the kindergarten.

· If you continue to be in arrears with payments, and you appear not to have any intention of paying the debts, legal measures may be taken against you.

**【Items of Consent】** · I consent that, if I am in arrears with school meal fees, Higashihiroshima City may investigate and make use of information about me (the person with the duty to pay the school meal fees) and the members of my household living off the same source(s) of household income, including items recorded in the Basic Resident Register, status of taxation with regard to municipal tax, etc., as far as is necessary for the purposes of credit management of school meal fees.

· I consent that, if I am in arrears with school meal fees, Higashihiroshima City and my

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child's school may share the information they have in order to determine details of the amount of my arrears and the reason for my non-payment, and the circumstances of my household.

Offer Regarding the Collection of School Meal Fees from Child Allowance Payments  
To the Mayor, Higashiroshima City

Regarding the following,  I consent  I do not consent

If I am in arrears with the payment of school meal fees, according to Section 1 or Section 2 of Clause 21 of the Child Allowance Law, I offer to allow the school meal fees to be paid from the Child Allowance payments I receive from the Mayor of Higashiroshima Allowance in question.

Further, unless I withdraw this offer, my payments of school meal fees will be made from Child Allowance payments, as specified in this offer.

This is a consent form for transfer from benefits (Child Allowance) when you are in arrears with payments. You will normally pay school meal fees by bank transfer or by using payment slips.

Date: 20○○YYYY ○ MM ○ DD  
Person receiving the Child Allowance payments

Name Saijo Taro Name of child Saijo Jiro

Address ○-○ Saijo Sakae-machi, Higashiroshima City