Application available up	to 1montl	h in advance,	but no	later at noc	n 12:00p	.m. 2 days	before t	the date	of use (excluding S	un, natio	nal holi	days)	
Guardian's name									Application date				
Mobile Phone						Child's Name							
year	mon	nth d	ay	date		-							
Date 20	/	/	-,	(	)	Age		year	month		Gender	M· F	
Time from	:	to	;				Lunch	11:00 11:40	(baby food) (complete)	Yes	No		
First time use □Yes □No							Snack	15:00		Yes	No		
【Reason of use】 Please fill out if you do not mind							Dinner	18.30		Yes	No		
										103	110		
□Caregiving □Refresh □Others ( )							Food Allergies □none □yes ( )						
Remarks							Can we put you on the waiting list? Yes No						
Charges (for staff use	only)												
		Regular ho	Early/Late hours	Ме	als				入力	者			
☐Minato residents (Mon-Sat)		2,000+(500h x	+(500 x )	lum ah	. F00. (an				確認	<b>+</b>			
☐Minato residents(Sun & Holiday)		2,500+(600h x	+(600 x )		: 500yen : 100yen				白				
□Others(Mon-Sat) □Others(Sun & Holiday)		3,000+(700h x	+(700 x )	dinner	: 500yen				処理	者			
		<u> </u>	Canc	ellation fee w	ill occur fi	rom noon 12	2:00pm of	f the day	before the day of use				
TOTAL		yen							case Sun or holiday.				
Diago call 070 EE02 2E2	O if you n	and to contac	<b>-</b> + our n	urcony staff	while ve	ur child cta	we at Do	kko					
Please call <b>070-5593-352</b>	-			•	•			кке.					
◆Correspondence r		-	•				•						
*Child's pick up should b Please make sure to cont	e done by tact us in a	y parents or th advance in ca	ne guar se of a	rdians on the ny changes v	e pick up who com	list and cir	cled belo -up.	ow.					
Pick up by*	Father		Othe				-	elation:	)				
	1) Father		Othe	,				elation:		TEL			
of emergency 2) Father			rs (name:				elation:	) TEL					
Body temperature: toda	,	°C / norm		°C Bowe	l movem	ent: nor			ft / diarrhea / non				
Sleeping last night	•	~	:	+	h conditi		•				1		
hours: today's n		: ~	Skin r		no / yes (reason:					· · ·			
today 511	-	Quantity: mod	orato/l		cation:	no /		a3011.			<u>,</u>		
Milk: last time	· · · ·	ı				in a week		os (dato:	namo				
↓ Request during stay	• (	(		cc) Immu	IIIIZatiOII	iii a week	· 110 / ye	es (uate.	name:		,		
Nap: no / yes / leav	Play	outside:	yes / no	(reason				)					
Time for bottle feeding:	:	(		cc)	2nd )	:		( cc	)	·			
Favorite plays / toys					Notes:								
<b>◆</b> Things you brough		ase put your c			=	II belongin	gs.						
change of cloth			•	•		]t-shirts(		□pants(	( pcs) □socks(	pcs)	□coat		
for baby		oes □bath pers in plastio		for nap x2 ncs) □v	-	_	-	□ bab	y bottles( pcs)		,		
<b>◆</b> Feedback from sta						(	μ σσ /	_ 223	, 20th 65( p.65)				
Bowel movement (排便				•	□soft(	軟) □dia	arrhea(	下痢)	( : )/(	: )			
Nap time(仮眠)No / Ye		· ~		<u>, (p.w./</u>		~ ·	1	, ו ארט	. , , , , ,	• ,			
Milk (ミルク) 1st :	(	cc) /	2nd	:	(	cc)	,						
◆Meal(食事)	lunch	snack dinr			behavior	during stay	(保育中	- の様子)					
complete(完食)	-					- ,							
rice/bread(主食)									N	<b></b>			
main dish(主菜) side dish(副菜)		-		Specia	Il note(特	(百重信表			Name of staff(スタ	ッノ名)			
soup (汁物)		-		Specia	ii iiote (1	ᄁᇚᆓᄶᄼ							
fruit(果物)		-							Name of staff(スタ	'ッフ名)			

**Application for Temporary Childcare** (New/ Change of time/ Cancel)

TEL 03-5444-1035

FAX 03-6435-0885