To Makuhari International School

(Fax: 043-296-0186 or Email: <u>h.takeshita@mis.ed.jp</u>)

Request for Enrollment Documents Form for April 2020

%Please send "Request for Enrollment Documents Form" by <u>Friday 04 October 2019</u>.

I am <u>not going to attend</u> the Information Session, therefore I would like to have the application documents sent by post.

Parent's Name in English:		,		
	Last Name		First Name	
Parent's Name in Japanese:	Last Nam			
Address (in Japanese if possible 可能			First Name	3
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(〒 —)				
Phone Number		(Hama E	ath ar's Mahil	Mathan'a Mahila)
r none Number				e One
Email			(Home	Father Mother)
				Circle One
MIS Sibling (if applicable)			(Grade:)
Your Child's Name in English				
	Last Name	First N		Middle Name
Your Child's Name in Japanese	· · · · · · · · · · · · · · · · · · ·		,	
	Last Name	First N	ame	Middle Name
	,	V 01.1	1 ² C 1 1	<i>(</i>) ()))
His/Her Birth Date / Year / Month		Your Chil	d's Gender <u>N</u>	<u> Iale / Female</u>
Teat / Wolltin	Day			
His/Her Grade in April 2020 Kindergarten / Elementary school (Grade)				
Circle One				
Please circle which admissions category your child is applying as:				
Foreign Nationality (Non-Japanese) / Dual Nationality / Japanese Returnee/ Non-Returnee Japanese child.				
Circle One				