

Reception No. \_\_\_\_\_

\_\_\_\_\_ Evacuation Site

## Evacuee Reception Form

Reception Date (YYYY/MM/DD): \_\_\_\_\_

<b>Address</b>	Nerima-ku, machi/cho, chome, ban, go,				
	(Building / Room No.)				
	Tel.			Cellphone	
<b>Evacuee's Name</b>	Write down in Notes if you or your family... - have any disease or medical problem. - have an occupation or license that may be helpful for supporting our evacuation life				
<b>Name</b>	<b>Male / Female</b>	<b>Relationship (Family Structure)</b>	<b>Birth Date (yyyy/mm/dd) / Age</b>	<b>Notes</b>	<b>Lodging</b>
	M / F		/ / (age:     )		Yes / No
	M / F		/ / (age:     )		Yes / No
	M / F		/ / (age:     )		Yes / No
	M / F		/ / (age:     )		Yes / No
	M / F		/ / (age:     )		Yes / No
	M / F		/ / (age:     )		Yes / No

Make sure to write down every one of your family in the form above whether or not you need lodging.

NOTE:	
Fleet Number: _____	
Shelter Leaving Date (yyyy / mm / dd) / /	You're going to live in ...     Your Home / Family Home / Other (     ) Address: Tel.

Administrative Use Only	Shelter:     Gym     Library     School building:   1st FL   2nd FL
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