参　加　者　名　簿

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| 開催日 | | 月　　　日（　　　） | | | | | | 行事名 | | |  | | | | |
| 参加人数 | | 人（大人　 　人・子ども　　 人） | | | | | | 主催 | | |  | | | | |
| 参加者誘導（担当：　　　　　　） | | | | | 託児誘導者（担当：　　　　　　） | | | | | | | キッズヘルパー（　　　　　名） | | | |
| 災害時戸外待ち合わせ場所： | | | | | | | | | ※キャンセル確認は組織運営部まで  　ＴＥＬ：0120-921-170／048-432-7754 | | | | | | |
|  | | |  | | | | | | | | | | | | |
|  | 組合員番号 | | | 氏名（敬称略） | | 参加費 | 託児費 | | | 子どもの名前 | | | 一般 | 電話番号 | 備考 |
| 1 |  | | |  | |  |  | | |  | | |  |  |  |
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☆受付で使用する際は、点線部分を折り電話番号が見えないようご配慮ください。