

Dear Mayor of Sakai City [School lunch application]

For the attention of Financial Institution Handling Public Money in Sakai City [Direct debit/Automatic Payment]

Direct Debit Request Form

School Lunch Application Form and Sakai City School Lunch Fee

Automatic Payment Application Form

I hereby apply for the provision of school lunch for the student listed below and request the payment method for the school lunch as detailed. By submitting this application, I agree to abide by the notes and terms of agreement on the reverse side.

Date (YYYY/MM/DD) / /

Parent/Guardian	Address	Postal code —		
	Katakana			Relationship to the student
	Full Name			
	Contact	(Daytime Tel) — —	Whose number? (Father / Mother / )	

Student	Name of School	Sakai City	<input type="checkbox"/> Elementary School (ES) <input type="checkbox"/> Junior High School (JHS) <input type="checkbox"/> Special Needs Education School (branch campus) <input type="checkbox"/> ES courses <input type="checkbox"/> JHS Courses
	Katakana		Grade / Class / Student Number
	Full Name		<input type="checkbox"/> New 1 <sup>st</sup> year/Transfer student ( __ grade ) <input type="checkbox"/> Grade __ Class __ Number __

• Direct debit/Automatic payment (Please read the "Contract (except for the Japan Post Bank)" before completing the form.) Please fill in the boxes with the bold lines located below.

• Payment slips (Please make payments using the payment slips that will be sent to you later.) You do not need to fill in the boxes below.

Please write the account details in the parent/guardian's name in either the box labeled "Financial Institution other than Japan Post Bank" or the box labeled "Japan Post Bank."

Bank Code (金融機関CD)	Branch Code (支店CD)	Payment starting month (YYYY/MM) /
Financial Institution <b>other than Japan Post Bank</b>	Bank Shinkin Bank Credit Union (Shinyo Kumiai) Labor Bank (Rokinh) JA Group	Deposit Type (預金種目) 1. Ordinary (普通)
	Hori (main office) Shiten (branch) Shisho (branch) Shuchosho (sub branch) Eigo-bu (main office)	Account Number* (口座番号) *Align to the right

Japan Post Bank	Contract Type (契約種別)	Code Number (通帳記号)	*1	Account Number* (通帳番号) *Align to the right
	30			
	Payee Account No.	00910-9-961068	Payee Name	Sakai City Accounting Manager

\*1 Please fill in the column only if there is a hyphen(s) (-) and a number after the Code Number in the bankbook.

Relationship to the student	Katakana	Seal (registered with the financial institution)
	Account Holder	
	Account Holder's address (Japan Post Bank only)	

Direct debit (payment) date is the 25th of each month between July and March (Re-debiting/repayment will be attempted on the 10th of the following month). If the direct debit (payment) day falls on the bank closing day, the withdrawal will occur on the following business day.

For financial institution use only	(Reason for incomplete information) except for Japan Post Bank	Approval stamp	Financial institution date stamp
	1. No existing account		
	2. Discrepancy in provided information Branch name, deposit type, account number, account holder		
	3. Discrepancy in seal impression		
For financial institution use only	4. Unclear seal impression	Seal verification	
	5. Other ( )		
For financial institution use only		Receipt stamp	

## School Lunch Application Form

## Notes:

1. Please fill out one copy of this application form for each student (school lunch recipient).
2. The period during which school lunches are provided to students (school lunch recipients) is from the start of elementary school or elementary school courses of special needs education school (or transfer from another school outside the city) to the graduation of junior high school or junior high school courses of special needs education school (or transfer to another school outside the city), unless otherwise requested.
3. If you wish to stop (or resume) school lunches due to an absence of five school days or longer, moving out, etc., you must notify us in advance.
4. If you wish to opt out of all or part of school lunch due to a food allergy or other reason, please consult with the school and submit the necessary documents to the school. Finally, the city must be notified to opt out of milk, bread or rice.
5. In the event of a temporary school closure due to a natural disaster, etc., or you cancel with less than five school days' notice, the school lunch fee will not be refunded. In the event of a class closure, the amount of the school lunch fee for the days starting from two days after the closure will be refunded.
6. Article 761 of the Civil Code, which stipulates joint liability for debts related to household necessities for married couples, applies to the payment of the school lunch fee.
7. A late fee may be charged if the school lunch fee is not paid by the due date.
8. If the school lunch fee remains in arrears and there is no intention to pay it, legal action may be taken.

## Agreements:

1. I consent to a payment to the account I have designated for the payment of the school lunch fee, in the event that a refund of the school fee occurs.
2. With this application form, I agree to provide the School Lunch Division with personal information (the register of school-aged children (*Gakureibo* 学齡簿), School Expense Subsidy (*Shugaku Enryo* 就学援助), public assistance (*Seikatsu Hogo* 生活保護), Special Needs Class Enrollment Grant (*Tokubetsu Shien Kyoiku Shugaku Shoreihi* 特別支援教育就学奨励費), details regarding child allowance and special benefits (*Jido Teate/Tokurei Kyufu* 児童手当・特例給付)) held by Sakai City and the Sakai City Board of Education for the purpose of school lunch administration and management, and to share such information among the organizations concerned.
3. In the event of delinquency in school lunch fees, I agree that the School Lunch Division may investigate and obtain the personal information of parents/guardians (designated payers) to the extent necessary to collect the debt, and share it among the organizations involved.
4. In the event of unpaid school lunch fee, if I do not comply with a reminder and demand, I consent to an asset investigation and to the initiation of court proceedings for the collection of the payment.

## Sakai City School Lunch Fee Direct Debit Request Form

## Contract (except for the Japan Post Bank)

1. When Sakai City sends payment slips for the school lunch fee, which I owe to Sakai City, to you, the designated financial institution (hereinafter referred to as "You"), I consent to having the amount stated on the payment slip, etc. debited from the designated account on the specified direct debit date without prior notification.
2. Regarding withdrawal procedures, and notwithstanding your terms and conditions for current accounts, ordinary deposit accounts, or savings accounts, I will not issue checks, submit the bankbook, or provide a withdrawal request form. I consent to having You conduct the withdrawal procedure as specified by You.
3. I will not request receipts for the relevant direct debit payments.
4. If the balance of the designated account is insufficient on the direct debit date, I will not object if You return the relevant payment slip, etc. to Sakai City without prior notice.
5. I will not object if this direct debit contract is terminated without prior notice, should You deem it necessary.
6. If I wish to terminate this direct debit contract, I will contact either You or Sakai City.
7. Should disputes arise regarding this matter, I will not cause any inconvenience to You, except in cases where loss or damage is deemed to be attributable to You.

Note: If you designate a Japan Post Bank account, the Automatic Payment Regulations (自動払込み規定; *Jido Haraikomi Kitei*) will apply.

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Date	(YYYY/MM/DD) / /
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Parent/Guardian	Address	Postal code —		
	Katakana			Relationship to the student
	Full Name			
	Contact	(Daytime Tel) — —	Whose number? (Father / Mother / )	

Student	Name of School	Sakai City	<input type="checkbox"/> Elementary School (ES) <input type="checkbox"/> Junior High School (JHS) <input type="checkbox"/> Special Needs Education School (branch campus) <input type="checkbox"/> ES courses <input type="checkbox"/> JHS Courses
	Katakana		Grade / Class / Student Number
	Full Name		<input type="checkbox"/> New 1 <sup>st</sup> year/Transfer student ( __ grade ) <input type="checkbox"/> Grade __ Class __ Number __

• **Direct debit/Automatic payment** (Please read the "Contract (except for the Japan Post Bank)" before completing the form.) Please fill in the boxes with the bold lines located below.  
• **Payment slips** (Please make payments using the payment slips that will be sent to you later.) You do not need to fill in the boxes below.

Please write the **account details in the parent/guardian's name in either** the box labeled "Financial Institution other than Japan Post Bank" or the box labeled "Japan Post Bank."

Bank Code (金融機関CD)		Branch Code (支店CD)		Payment starting month	(YYYY/MM) /
Financial Institution <b>other than Japan Post Bank</b>	Bank	Horten (main office)	Deposit Type (預金種目)	Account Number* (口座番号) *Align to the right	
	Shinkin Bank	Shiten (branch)	1. Ordinary (普通)		
	Credit Union (Shinyo Kumiai)	Shisho (branch)			
	Labor Bank (Rokui)	Shuchosho (sub branch)			
	JA Group	Eigyobu (main office)			

Japan Post Bank	Contract Type (契約種別)	Code Number (通帳記号)		*1	Account Number* (通帳番号) *Align to the right
	30				
	Payee Account No.	00910-9-961068		Payee Name	Sakai City Accounting Manager

\*1 Please fill in the column only if there is a hyphen(s) (-) and a number after the Code Number in the bankbook.

Relationship to the student	Katakana		Seal (registered with the financial institution)
	Account Holder		
	Account Holder's address (Japan Post Bank only)		

Direct debit (payment) date is the 25th of each month between July and March (Re-debiting/repayment will be attempted on the 10th of the following month). If the direct debit (payment) day falls on the bank closing day, the withdrawal will occur on the following business day.

For financial institution use only	(Reason for incomplete information) except for Japan Post Bank 1. No existing account 2. Discrepancy in provided information Branch name, deposit type, account number, account holder 3. Discrepancy in seal impression 4. Unclear seal impression 5. Other ( )	Except for Japan Post Bank	Approval stamp	Financial institution date stamp
			Seal verification	
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## Notes:

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7. A late fee may be charged if the school lunch fee is not paid by the due date.
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3. In the event of delinquency in school lunch fees, I agree that the School Lunch Division may investigate and obtain the personal information of parents/guardians (designated payers) to the extent necessary to collect the debt, and share it among the organizations involved.
4. In the event of unpaid school lunch fee, if I do not comply with a reminder and demand, I consent to an asset investigation and to the initiation of court proceedings for the collection of the payment.

## Sakai City School Lunch Fee Direct Debit Request Form

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1. When Sakai City sends payment slips for the school lunch fee, which I owe to Sakai City, to you, the designated financial institution (hereinafter referred to as "You"), I consent to having the amount stated on the payment slip, etc. debited from the designated account on the specified direct debit date without prior notification.
2. Regarding withdrawal procedures, and notwithstanding your terms and conditions for current accounts, ordinary deposit accounts, or savings accounts, I will not issue checks, submit the bankbook, or provide a withdrawal request form. I consent to having You conduct the withdrawal procedure as specified by You.
3. I will not request receipts for the relevant direct debit payments.
4. If the balance of the designated account is insufficient on the direct debit date, I will not object if You return the relevant payment slip, etc. to Sakai City without prior notice.
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Japan Post Bank	Contract Type (契約種別)	Code Number (通帳記号)	*1	Account Number* (通帳番号) *Align to the right
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Approval stamp
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