

● For both new and continuing users, please be sure to submit this application form.

**After-school Children’s Club for FY2024 (After-school Childcare)  
Application Form of the Reduction and Exemption (or Cancellation  
of Reduction and Exemption) for Usage Fees**

Electronic application



To: Mayor of Kobe City

I will apply for the reduction and exemption (or cancellation of reduction and exemption) of the usage fee as follows,  
along with relevant

Date of application: Month/Day/Year

Please fill out after agreeing that Kobe City confirms your “Receipt of Child Rearing Allowance” and  
“Information regarding Resident Tax” using the system.

Information of the Parents and Guardians (Including Foster Parents)		
Pronunciation (Furigana)		
Full Name		
Date of Birth	Month/Day/Year	
Address	Postal Code ****-ku, Kobe City	
Cellphone number	*Kobe City may contact the guardian’s phone number. If the phone number is not reachable, Kobe City may contact the guardian by SMS (short message).	
E-mail address		
Contents of the Application (please check the applicable items)		
Contents of the Application	<input type="checkbox"/> New application <input type="checkbox"/> Continuation application (for change of facility) <input type="checkbox"/> Cancellation of reduction and exemption	
	In case of cancellation	Month of cancellation: Month - Year Reason for cancellation:
Classification of the Application (please check the applicable items)		
	Classificatiois of	Required attachments
Full amount exemption	<input type="checkbox"/> Household on Welfare	● Certificate of application for public assistance (within 3 months after issuance)
	<input type="checkbox"/> Single-mother/Single-father Family in the Household Exempted from Municipal Tax	None <u>However, if you are not receiving Child Rearing Allowance,</u> ● Recipient Certificate of Medical Expense Subsidies for Single-parent Families (copy) (or other documents proving single-parent family, etc.)
	<input type="checkbox"/> Household Entrusted as a Foster Parent	● Foster parent certificate
Half amount exemption	<input type="checkbox"/> Household Exempted from Income Tax	Either of the following documents *For all people aged 18 years or older in the same household ● Withholding slip (copy) for 2023 = Received from the workplace ● 2023 final income tax return form 1 and 2 (copy) = Declaration filed with the tax office (stamped with the tax office’s reception stamp) <u>However, if you apply for this application after June 2024, the above documents are not required.</u>

\*Even if you are not required to submit documents, you may be asked to submit documents when the information cannot be confirmed on the Kobe City system.

**Please be sure to fill out the back side →**

**Information about Your Children(Please fill out the required information for each after-school childcare facility to use.)**

After-school childcare facility to use ①		<input type="checkbox"/> Children's Center <input type="checkbox"/> Children's Center Annex <input type="checkbox"/> After School Childcare Corner <input type="checkbox"/> After School Childcare Corner Annex		
	Pronunciation (Furigana) Child's name	Date of Birth	Sex	After-school childcare facility (if there is a change)
①		Month/Day/Year	Male / Female	(Before change)
②		Month/Day/Year	Male / Female	(Before change)
③		Month/Day/Year	Male / Female	(Before change)
④		Month/Day/Year	Male / Female	(Before change)
⑤		Month/Day/Year	Male / Female	(Before change)

**If you will use multiple after-school childcare facilities, please also fill out the following.**

Other after-school childcare facilities to use ②		<input type="checkbox"/> Children's Center <input type="checkbox"/> Children's Center Annex <input type="checkbox"/> After School Childcare Corner <input type="checkbox"/> After School Childcare Corner Annex		
	Pronunciation (Furigana) Child's name	Date of Birth	Sex	After-school childcare facility (if there is a change)
①		Month/Day/Year	Male / Female	(Before change)
②		Month/Day/Year	Male / Female	(Before change)
③		Month/Day/Year	Male / Female	(Before change)

**Account Information**

Do you use a direct debit for the usage fee for after-school child care?	Yes / NO
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**If you do not use a direct debit for the usage fee for after-school childcare, please fill out the transfer destination account number for the refund below.**

Financial Institution		Branch Name	
Account Number (please write left-justified)			
Account Holder's Name			