



# CFAO TOMB VISIT ACCESS PASS (墓参入城申請書)

- Submit no less than 10 working days prior to event 立入希望日の休日・祝祭日を除いた10日前までに提出すること。

見本

ADMIN NO.

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**Camp Shields (キャンプシールドズ) - Okinawa City Office Base Affairs**

|                         |                     |                |
|-------------------------|---------------------|----------------|
| Name (代表者)(Last, First) | Phone Number (電話番号) | Signature (署名) |
|-------------------------|---------------------|----------------|

**White Beach (ホワイトビーチ)  Paintball Area (内間地区) - Uruma City Office Base Affairs**

|  |                                      |                                 |
|--|--------------------------------------|---------------------------------|
| Name(代表者)(Last, First)<br>うるま 太郎 Uruma Tarou | Phone Number (電話番号)<br>090-1234-5678 | Signature (署名)<br>うるま市防災基地渉外課記入 |
|--|--------------------------------------|---------------------------------|

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| Dates/Times Requested 希望する立入り日時<br>2019/4/20 10:00~12:00 | <ul style="list-style-type: none"> <li>- Names need to be written in Kanji, Furigana and Alphabetical (立ち入りする全員の氏名・フリガナ・ローマ字表記を必ず記入すること)</li> <li>- Need picture ID for access (立ち入り当日は写真付きの身分証を携帯すること)</li> <li>- Access time is between 0900-1700 (立ち入り時間は9時~17時の間で設定すること)</li> </ul> |
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\* I understand the base guidelines for access and that I am responsible for all visitors' conduct while aboard the installation. 下記の規定を理解し施設内において訪問者に同行しその行動に責任を負います。  
 Abuse of this privilege will result in the revocation current/future base access. 不正や悪用があった場合、今後入城する権利が取り消されます。Persons under the age of 18 must be accompanied by their parent/guardian, or have in their possession a signed permission slip. 18歳未満の入城者については保護者の同行もしくはその委任状を必要とします。\* If the number of visitors exceeds the space allotted, use additional sheet if necessary. 入城者の人数が以下の欄に入らない場合はこの様式を追加し提出すること。\* This form is not valid for Designated Third Country Nationals (USFJI 31-204). この申請書はUSFJI31-204に指定された第3国の者には適用されません。\* Individuals must possess a suitable means of identification while on or attempting to gain access to the area(s) listed herein. Failure to do so may result in the denial of access or removal from the area. 入城の際は常に身分証明書を携帯すること。提示がない場合、入城拒否又は退去を命じられることがあります。

| VISITOR INFORMATION (入城者氏名) |               |                |                  |                              | VEHICLE INFORMATION (車両情報) |            |           |                       |
|-----------------------------|---------------|----------------|------------------|------------------------------|----------------------------|------------|-----------|-----------------------|
|                             | Last Name (姓) | First Name (名) | Citizenship (国籍) | Age (if <18) (年齢 (18歳以下の場合)) | Make (メーカー)                | Model (車種) | Color (色) | License Plate* (ナンバー) |
| 1                           | Uruma         | Tarou          | Japan            | 50                           | TOYOTA                     | Corolla    | White     | Oki58 a 12-34         |
| 2                           |               |                |                  |                              |                            |            |           |                       |
| 3                           |               |                |                  |                              |                            |            |           |                       |
| 4                           |               |                |                  |                              |                            |            |           |                       |
| 5                           |               |                |                  |                              |                            |            |           |                       |
| 6                           |               |                |                  |                              |                            |            |           |                       |
| 7                           |               |                |                  |                              |                            |            |           |                       |
| 8                           |               |                |                  |                              |                            |            |           |                       |
| 9                           |               |                |                  |                              |                            |            |           |                       |
| 10                          |               |                |                  |                              |                            |            |           |                       |
| 11                          |               |                |                  |                              |                            |            |           |                       |
| 12                          |               |                |                  |                              |                            |            |           |                       |
| 13                          |               |                |                  |                              |                            |            |           |                       |
| 14                          |               |                |                  |                              |                            |            |           |                       |
| 15                          |               |                |                  |                              |                            |            |           |                       |
| 16                          |               |                |                  |                              |                            |            |           |                       |
| 17                          |               |                |                  |                              |                            |            |           |                       |
| 18                          |               |                |                  |                              |                            |            |           |                       |
| 19                          |               |                |                  |                              |                            |            |           |                       |
| 20                          |               |                |                  |                              |                            |            |           |                       |

DO NOT MARK BELOW THIS LINE (担当者記入欄)

|                            |   |                            |
|----------------------------|---|----------------------------|
| Dates Authorized (許可された期間) | Records Check (記録確認)  | Approval Signature (米軍側署名) |
| TO                         | Records on File: <input type="checkbox"/> Yes <input type="checkbox"/> No - Checked By:               |                            |
| Times Authorized (許可された時間) | Signature X   |                            |
| TO                         | Not Valid Without Original Signature/Stamp<br>Access may be authorized by the Security Officer 原本のみ有効 |                            |