

Example**Visitor Register Form**

- Please fill in the bold-framed areas.

Date & Time	7 / 31 / 2024		2:00 (am / pm)
Name of Visitor	Name	Taro Tenmon	
	Name of Company/Organization	XXXXX Company, Inc.	
	Number of Visitor	3 person (s)	
	Telephone Number	012 (345) 6789	
Place of Visit	Name of Department	Health and Safety Committee <input checked="" type="checkbox"/> Advanced Technology Center	
	Person in Charge	Mr. Sun Star	
Purpose of Visit (Please check the box)	<input checked="" type="checkbox"/> Meetings <input type="checkbox"/> Brief Visit <input type="checkbox"/> Consultation <input type="checkbox"/> Interview <input type="checkbox"/> Seminar <input type="checkbox"/> Bid Related (i.e. Public Offering) <input type="checkbox"/> Press Conference <input type="checkbox"/> Vocational interview <input type="checkbox"/> Delivery <input type="checkbox"/> Remote observation <input type="checkbox"/> Others ()		

<Precautions>

- You need to present a personal identification for this procedure. (i.e. Driver's License, Passport, etc.)
- All visitors are required to fill out the Visitor Register Form. If visiting in groups, (**except Advanced Technology Center**) please have the representative fill out the form.

入館カード 貸与番号		返却 確認	時間
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Visitor Register Form

- Please fill in the bold-framed areas.

Date & Time	Month/Day/Year		: (am / pm)
Name of Visitor	Name		
	Name of Company/Organization		
	Number of Visitor	person (s)	
	Telephone Number	()	
Place of Visit	Name of Department	<input type="checkbox"/> Advanced Technology Center	
	Person in Charge		
Purpose of Visit (Please check the box)	<input type="checkbox"/> Meetings <input type="checkbox"/> Brief Visit <input type="checkbox"/> Consultation <input type="checkbox"/> Interview <input type="checkbox"/> Seminar <input type="checkbox"/> Bid Related (i.e. Public Offering) <input type="checkbox"/> Press Conference <input type="checkbox"/> Vocational interview <input type="checkbox"/> Delivery <input type="checkbox"/> Remote observation <input type="checkbox"/> Others ()		

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