

<高校生用>

Training room user Pledge

長崎県立総合体育館 県北トレーニング室

Name _____

Application number (_____)

I submit this application for using this training facility.

I promise that I will comply the rules and safety precautions of this facility,
and follow the instructor's directions.

In case of any accidents, injuries or loss, I will be liable about this incidents.

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| | |
|------------------|---------|
| Address | 〒 _____ |
| | _____ |
| Phone number | _____ |
| Protector's name | _____ |

長崎県立総合体育館 県北トレーニング室

TEL 0956-23-0010