

患者氏名 :
患者ID :

English/にほんご

Patient Registration Form

しんさつの もうしこみ

- You will be charged 7,700 yen (tax-included) for a consultation without a referral.
- Submit referral/health records/medical data if you have.
- **Fill in the form and submit it with a health insurance card or My Number card** at the reception counter.

				Registration date (YYYY/MM/DD)	/ /
We will verify your ceiling limit of monthly medical care payment through the online eligibility verification system. Check the box on the right <u>if you choose to reject it.</u>					<input type="checkbox"/>
Name なまえ				Sex せいべつ	<input type="checkbox"/> Male/おとこ <input type="checkbox"/> Female/おんな
Date of birth (YYYY/MM/DD) たんじょうび	Year/ねん	Month/がつ	Day/にち	Age ねんれい	years old/さい
Address or accommodation in Japan じゅうしょ (すんでいるところ)					
Address in home country (for short-term visitors only) じぶんのくにのじゅうしょ (すぐにくにへかえるひとだけ)					
Phone No. 1 でんわばんごう 1			Phone No. 2 でんわばんごう 2		
Nationality こくせき			Interpreter request つうやくは いますか	<input type="checkbox"/> Yes/いる <input type="checkbox"/> No/いない	
Native language いつも はなす ことば			Occupation しごと		
Other languages spoken ほかにはなせる ことば			Special considerations required for religious reasons しゅうきょう		
Emergency contact details かぞく・ともだち・しごとのれんらくさき					
Name なまえ				Relationship だれですか？	
Address じゅうしょ					
Phone No. 1 でんわばんごう 1			Phone No. 2 でんわばんごう 2		

