Osaka Aquarium Kaiyukan

(海遊館宛)

$\underline{School\ Activity\ Certification}_{\tiny (\rlap{\rlap{\neq}} \rlap{\rlap{\neq}} \rlap{\rlap{\neq$}} \rlap{\rlap{$\neq$}} \rlap{\rlap{$\downarrow$}} \rlap{\rlap{$\neq$}} \rlap{\rlap{$\downarrow$}} \rlap{\rlap{$\downarrow$

I hereby certify that the following group is visiting your aquarium as a school activity. (校外学習〔遠足・修学旅行〕であることを証明します。)

Date of visit: (入館日)		day (目)		month(月))	_year(年)		
Number of persons (人員)		person	consists of (構成)		teachers & ^(教員)		students ^(生徒)	
Address: (住所)								
	Zip code: (郵便番号)				Country (国 名)			
Phone number:								
(Please begin with co	ountry code)				_			
Name of scho (学 校 名)	ool:							
Name of Princ (校 長 名)	ipal:					_		
		Signa	ature of Pri (校長のサイン	ncipal:				
Note: (備考欄)								

Note: This certification shall be submitted on the day of your visit at Group Visit Registration in the Entrance Building.

Sincerely yours,