奉仕活動総合補償保険用参加者名簿

〇〇 年 〇 月 〇 日

大崎町長　　東　　靖　弘　殿

記入例

集 落 名　**〇〇〇〇 集落**

住　　所　**大崎町 仮宿 1029**

氏　　名　**大 崎　太 郎**　　㊞

電話番号　**099-476-〇〇〇〇**

1 日　時　〇年〇月〇日（日）　午前８時００分から １０時００分まで

2 場　所　**〇〇〇〇集落内道路など**

3 内　容　**草刈 ， ゴミ拾い作業**

4 参加者

＊＊＊＊＊＊	＊＊＊＊＊＊		
＊＊＊＊＊＊	＊＊＊＊＊＊		
＊＊＊＊＊＊	＊＊＊＊＊＊		
＊＊＊＊＊＊	＊＊＊＊＊＊		
＊＊＊＊＊＊	＊＊＊＊＊＊		
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			
＊＊＊＊＊＊			