**Evacuee Card (Front)**　　　　　　　　　　　　　　【Form-7】

避難者カード【英語】

**Date filled out:**　　　 　 　 　　**Fill out for each household.**

|  |  |  |
| --- | --- | --- |
| **Evacuation Date/Time** |  | Shelter group－　No.－  |
| **Evacuation Site** | Evacuation shelter ・ Home　・　Other　( )\*If evacuated to a car, please write parking location. |
| **Residents’ Association** | 　\*If you are not a member, write “未加入” (not a member). |
| **Mark those who are at an evacuation shelter with ○** | **furigana****Full Name** | **Age** | **Sex** | **Relationship to Representative** | **Notes \*Write the number of type of support and things that require particular consideration.** |
|  | (Representative) |  | M・F・Other |  |  |
|  |  | 　　 　 | M・F・Other |  |  |
|  |  | 　　 　 | M・F・Other |  |  |
|  |  | 　　　 　 | M・F・Other |  |  |
|  |  | 　　　 　 | M・F・Other |  |  |
| **Address** | 〒 |
| **Representative’sPhone Number** | 　(　 　)　  |
| **Evacuated with a pet** | Yes　・　No　　　　　\*If “Yes”, please also fill out the Pet Registration Form. |
| **People who require support****\*If applicable, write respective numbers in “Notes” area.** | 1) Pregnant/nursing　　2) Infant　　3) Disability (　　　　　　　　　　 )4) Needs a caregiver　5) Uses a medical device (　　　　　　　　　　 )6) Allergy (　　　　　　　　) 7) Foreign resident (Nationality:　　　　　　　　　　 )8) Other (　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　 ) |

\* “People who require support” refers to people who need special considerations for life at an evacuation shelter due to being pregnant/nursing, having small children, having a disability, etc.

**Evacuee Card (Back)**　　　　　　　　　　　　　　　　【Form-7】

**The back page can be filled out once your situation has stabilized.**

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| **Releasing information about your safety (Please circle “Yes” or “No”).** |
| Would you like your information to be shared publicly on the government’s website or media outlets? | Yes ・ No |
| Would you like your information shared with relatives/roommates/friends who inquire about your safety? | Yes ・ No |
| **Damage to Residence?****\*Circle those that apply.** | Yes　・　No \*If “Yes”, describe the extent of the damage below. |
| \*Example:・My home has been damaged and I cannot live in it for the time being・I can return to my residence if I fix up the inside a little |
| No electricity　　　　No water　　　　No gas　　　　No phoneOther (　　　　　　　　　　　　　　) |
| **Information about the injured** |
| Write their name and details about the status of their injury/illness. |
| **Admitted Location****(transfer location)** |  |
| **Admitted Location Information****(transfer address)** |  |
| **Other Important Information (if anybody with you has certain certifications and are able to help out, please write their name and those details):** |

＜避難所運営委員会記入欄 To be filled by evacuation shelter staff＞

|  |
| --- |
|  |
| 退所年月日 | 　　　　　　年　　　　月　　　　日 |
| 退 所 先 |  | 電話 |  |