

「全国子ども会安全共済会」 <死亡・後遺障害共済金> 請求書兼事故証明書

公益社団法人 全国子ども会連合会 御中

都道府県・指定都市子連
代表者の事故証明印

都道府県・指定都市子連名



所属市区町村等子連名

単位子ども会名

代表者名



単位子ども会番号

全国子ども会安全共済会 共済約款に基づき、関係書類を添えて共済金を請求します。

Form with fields for applicant information, address, date of request, and bank details.

<災害状況報告書兼事故証明書欄>

Form for accident report including fields for date, time, location, and medical treatment details.

(事故状況)

Form for injury details including body parts, activity classification, and symptoms.

Form for personal information handling regarding the insurance agreement.

Form for local branch information including date received and responsible person.

Form for prefecture-level branch information including date received and date of completion.

2020.10 改訂