

Accomodation agreement for minors

Staying Y M D. Staying for () nights. According to this agreement, the guardian of the underaged staying guest approve this activity.

[Name of staying guest (Under age)]

NAME	Mr. / Ms.			
BIRTH DAY		Y	М	D
AGE				Years old

[Name of staying guest (Parents)]

NAME	Mr. / Ms.
MOBILE PHONE NUMBER	+
COUNTRY	
E-MAIL	
RELATION	

*If the guest using our accommodation is underaged(16-18 yold) a document from the guest parents needed when staying by the guest themselves or staying with other underaged companies.

*Personal information that you filled in this form. We will not share to the third party.

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