Request Form for Disclosure of Personal Data

To: Manager of Personal Data Consultation Desk at Amusement Hokkaido

Please complete the following form and mail it to us along with documentation verifying your identity.

[Purpose of Use of Personal Data]

The information you provide here will never be used for any purpose other than tasks related to the notification of the purpose of use as well as the disclosure, modification, addition, deletion, suspension of use, erasure, or suspension of third-party provision (collectively, "**Disclosure etc.**").

[Identity Verification Documents]

Driver's license, passport, My Number card, certificate of residence, insurance card, residence card, etc. with your permanent domicile (address) blacked out

[Name of entity handling personal information and privacy officer]

Amusement Hokkaido Co., Ltd. Privacy Officer: Junko Saitō

Tel: 0570-001-501

Identity Verification	Name	Agent Name (only if requesting via proxy)
Full Name		
Address		
Telephone		
Enclosed Identity Verification Documents		*Also include power-of-attorney
Type of Request	□ Notification of purpose of use □ Disclosure □ Modification, addition, or deletion □ Suspension of usage, deletion or third-party provision □ Record of third-party provision	
Date of Request		
Details		
For Internal Use	Date Received	Received By