

① 本人手配の見本

November XX, 2006

Visitor Program Coordinator

XXXXXXXXXXXXXXXXXXXX(医療機関名)

FAX No. XXXXXXXXXXXXXXX

RE: Holliday Dialysis

Dear Sir or Madam

I would like to reserve dialysis at your center. I plan to visit XXXX City on XXXX(曜日を入ると確実にあります。) January XX, 2007 and leave on XXXX(曜日) XX January.

I will be staying at XXXX Hotel.

My preferred dialysis day(s) is(are) Saturday XXXX(曜日) January XX, (and XXXX(曜日) January XX,) 2007. The time is available in the morning or afternoon (on both of days).

I would like you to advice me what further information you require by return facsimile to +81-XX-XXX-XXXX.

Patient Name:

Address:

Tel:

Fax:

e-mail address:

Attending Physician: (日本の主治医)

Address:

Tel:

Your support on my reservation will be appreciated

Sincerely,

Sign

Name

Fax: No.

Address:

② 代理人手配の見本

November XX, 2006

Visitor Program Coordinator

XXXXXXXXXXXXXXXXXXXX(医療機関名)

FAX No. XXXXXXXXXXXXXXX

RE: Holliday Dialysis

Dear Sir or Madam

This is about Mr (Ms). XXXX XXXX. I am writing this on behalf of Mr.(Ms). XXXX XXXX.

He(She) plans to visit XXXX City on XXXX (曜日を入れると確実になります。) January XX, 2007 and leave on XXXX (曜日) January XX. He(She) would like to have dialysis reservation(s) on XXXX(曜日) January XX, and XXXX(曜日) January XX, 2007. The time is available in the morning or afternoon (on both of days).

He(She) will be staying at XXXX Hotel.

I would like you to advice me about what further information you require by return facsimile to +81-XX-XXX-XXXX.

Patient Name:
Address:
Tel:
Fax:
e-mail address:
Attending Physician: (日本の主治医)
Address:
Tel:

Your support on the reservation will be appreciated.

Sincerely,

sign

Name

Fax No.

Address