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| 令和６年度 越前町手話奉仕員養成講座【基礎課程】受講申込書 |
|  | 記入日：令和６年　 月 　日 |
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| 住　所 |  〒 　　  |  |
| 連絡先 | 携帯番号： |  |
|  TEL： |  ﾒｰﾙｱﾄﾞﾚｽ： |  |
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| 職　業 |  　会社員　・　パート　・　無職　・　学生　・　その他 |  |
| 備　　考 |  |  |
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**＜申込先＞**福井県聴覚障がい者協会**・FAX：0776-63-6692****・E-mail：kouza@fukui-deaf.jp****＜申込締切日＞　5月１０日（金）必着** |