(Form No. 3)

　　　　　　　　　　　　　　　　　　　　　　　　　　　　 dd/mm/yyyy

**Project to Encourage Overseas Tourists to Visit and Stay in Himeji City**

**Application for Subsidy Change/Cancellation**

To: President, Himeji Convention & Visitors Bureau

Company Name

President’s Name

Address

Post Code

TEL

Name of person in charge

Signature:

E-mail

With regard to the tour referred to in Directive #\_\_\_ dated dd/mm/yyyy, we hereby apply for a change/cancellation as described below, in accordance with Article 6 of the Guidelines for the Project to Encourage Overseas Tourists to Visit and Stay in Himeji City

|  |  |  |  |
| --- | --- | --- | --- |
|  | Change |  | Cancel |

1. Change/Cancel

Reason for cancellation

* Please fill in the spaces for the relevant changes below.

1. Amount　　(Original)　　 　　　　　　　　　　　 　　　JPY

　　 (Requested） 　　 　　　　　　　　 JPY

1. Dates (Original） From dd/mm/yyyy through dd/mm/yyyy

(Requested) From dd/mm/yyyy through dd/mm/yyyy

1. # of visitors (Original） 　　　　　　　　 people

(Requested） 　　　　　　　　 people

1. Accommodation（Original）

（Requested）