



3) Enter your period of enrolment at SU  
Enrolment in April 2026.  
Completion in July 2026 or February 2027

4) Select A for enrolment type  
(B also covers "Movable property for daily use"  
and "Tenant liability".  
You may select this option if you wish)

5) Insurance payments are made at convenience stores.  
Read the terms and conditions and tick the box to "Agree".

6) Enter your details  
The telephone number may be left blank.

**Insurance period**

The starting month and year of studying abroad Home

2026 / 4

The completion month and year of studying abroad Home

2026 / 7

Starting date of insurance

If the person is already enrolled in the university, please place a check to select the insurance starting month and year.

Enrolled in the university

2026 / 4

If you do not pay the insurance premium by the end of previous month of the insurance starting month, your insurance starts on the next day of the payment.

Insurance period

4 month(s)

**Enrolment type** Overview of compensation

\*Please note that this is an insurance with a lump sum enrollment up until graduation.  
\*Please note that if the public health insurance system is incorrectly selected, you may not be able to receive insurance benefits.

- If you are staying in Japan (studying abroad) for over three months, you must enroll in health insurance. If you choose "not enrolled in health insurance" under the public medical insurance system, please verify the content of your selection. If you have not enrolled in the health insurance, please go through the procedure and consider enrolling in our insurance.

I reviewed the explanation on whether or not to enroll in health insurance, and thereby agree.

Address based for commuting to school Home

Home  Living Alone

\*The type of plan you can subscribe to will change depending on your selection for "Residence that will serve as your commuting base". If you live with family members, please select "Home". If you do not live with family members, please select "Living Alone". Even if you are "Living Alone", you may still be able to subscribe to the "Home" type of plan.\*

Enrolment type Home

A-type detail

Insurance premium (For 4 month(s)) 6,330 yen

B-type detail

Insurance premium (For 4 month(s)) 8,240 yen

**Payment method**

Payment for the insurance premium is to be made via a convenience store.  
Please pay the premium before the due date.  
Some convenience stores accept only cash payment.  
If the insurance premium and the convenience store's service charge exceeds 300,000 yen, you will not be able to pay through the convenience store, and therefore, you will not be able to enroll from this website.  
We are sorry, but please contact the "Inquiry contact" displayed at the bottom left of the screen.

Payment method Home

Convenience store

Payment deadline

2026/4/25

Please be careful if the payment deadline is approaching.  
If you need the coverage period to start on the start date, please pay the insurance premium by the payment deadline.  
For non-term enrollment, please note that the insurance coverage will start the following day after the payment date.

[Payment deadline and insurance start date](#)

Please read through the "Payment Deadline and Insurance Start Date" section in the end and agree to the details explained.

Agree

**Student information (person eligible for insurance)**

Student's name (English) Home

Last name

First name

If you have a middle name, please write that in the last name column.

Student's name (Kana)

Last name

First name

If you have a middle name, please write that in the last name column.

Sex Home

Male  Female

★ Date of birth of the student Home

2008 / 1 / 1

Student's telephone number Input with numbers and hyphens

Student number

Student's email address Input with alphanumerics and numbers

**Insurance period**

The starting month and year of studying abroad Home

2026 / 4

The completion month and year of studying abroad Home

2027 / 2

Starting date of insurance

If the person is already enrolled in the university, please place a check to select the insurance starting month and year.

Enrolled in the university

2026 / 4

If you do not pay the insurance premium by the end of previous month of the insurance starting month, your insurance starts on the next day of the payment.

Insurance period

11 month(s)

**Enrolment type** Overview of compensation

\*Please note that this is an insurance with a lump sum enrollment up until graduation.  
\*Please note that if the public health insurance system is incorrectly selected, you may not be able to receive insurance benefits.

- If you are staying in Japan (studying abroad) for over three months, you must enroll in health insurance. If you choose "not enrolled in health insurance" under the public medical insurance system, please verify the content of your selection. If you have not enrolled in the health insurance, please go through the procedure and consider enrolling in our insurance.

I reviewed the explanation on whether or not to enroll in health insurance, and thereby agree.

Address based for commuting to school Home

Home  Living Alone

\*The type of plan you can subscribe to will change depending on your selection for "Residence that will serve as your commuting base". If you live with family members, please select "Home". If you do not live with family members, please select "Living Alone". Even if you are "Living Alone", you may still be able to subscribe to the "Home" type of plan.\*

Enrolment type Home

A-type detail

Insurance premium (For 11 month(s)) 10,930 yen

B-type detail

Insurance premium (For 11 month(s)) 14,220 yen

Address:

The address for I-house is as follows.

Postal code 338-8570

(Room number), 645 Shimo-Okubo, Sakura-ku, Saitama-shi

Those residing off-campus should enter their address.

Phone number :

If you do not yet have your own telephone numbers,  
please enter the university's telephone number instead.  
SU's phone number 048-858-3011

7) Enter your supporter's details and click "NEXT"

**Subscriber's information**

The subscriber is the person who will pay the insurance premium. If the dependent pays the insurance premium, please provide the information of the dependent in the subscribers name column.

Same as student

**Subscriber's name (English)** Required

Last name

First name

If you have a middle name, please write that in the last name column.

**Subscriber's name (Kanji)**

Last name

First name

If you have a middle name, please write that in the last name column.

**Subscriber's postal code** Input with numbers Required

-

**Subscriber's address** Required

A subscriber's certificate will be sent to the address entered in the "subscriber's address" column.

Please enter the address of your residence in Japan. It will take at least 1 month for the membership card to be sent. If the period of the overseas study program is less than 3 months, please consult with the person in charge at the university and enter the address of the university office.

**Subscriber's phone number** Input with numbers and hyphen Required

**Supporter's information** [Who can be designated as a supporter?](#)

Same as subscriber

**Relation to the student** Required

**Supporter's name (English)** Required

Last name

First name

If you have a middle name, please write that in the last name column.

**Supporter's name (Kanji)**

Last name

First name

If you have a middle name, please write that in the last name column.

**Subcontract insurance company**

Tokai Marine & Nichido Fire Insurance Co., Ltd.  
(Branch office of the section in charge) 関東中央支店マーケット開発チーム  
TEL: 048-650-8381  
Reception hours(Weekdays 9:00-17:00)

**NEXT**

3. Confirm the information you have entered.

1) If everything is correct, click "NEXT".

Supporter's information

Relation to the student  
Parents

Supporter's name (English)  
Saitama Taro

Supporter's name (Kanji)  
Saitama Taro

Please confirm the following, and then click "Next" to finalize the application and proceed to the payment screen.

After reading and agreeing to (1) through (4), 1 and all insured parties agree to coverage by the Japan Educational Exchanges and Services association.

(1) All information provided in the application of disclosure/verification of identity is correct (the individual listed in the Insured Party column is a constituent member of the insurance policy society).

(2) I understand the contents outlined in the "Disclosure Statement etc." explanatory notes.

(3) I understand the contents of the "Subscription Contents: Points to Confirm" attached to the "Disclosure Statement etc." explanatory notes.

(4) I understand the contents of the "Guide to Handling of Personal Information".

Please click "Back" to make any corrections to the information provided.

Back NEXT

2) Select "Seven-Eleven" as the convenience store for payment

Payment at Convenience Store

Payment Amount 6,605 JPY

Select the convenience store

Seven-Eleven FamilyMart  
Lawson MINISTOP  
Seicomart Daily Yamazaki

3. Click the payment slip number link.

Display the following screen and save it.

(Screenshots are also OK)

Payment at Convenience Store

Payment Amount 6,605 JPY

Selected store Seven-Eleven

Payment slip number 7271088387069

Payment slip [https://payment.sei.co.jp/rd/7b\\_0607516002\\_7271088387069/250929029028](https://payment.sei.co.jp/rd/7b_0607516002_7271088387069/250929029028)

The Number Expiry Date 2026/04/25

● Be sure to write down the above information because it will be needed to make payment.  
● Payment should be cash only.(Credit card payments not accepted.)



Completed

Payment at Seven-Eleven

お支払店 インターネットショッピング私込票

お支払店	セブンイレブン (東京 豊島区)
お支払先	セブンイレブン株式会社
お支払先住所	〒135-8501 東京都豊島区池袋1-1-1
お支払先電話番号	03-5561-0101
お支払先FAX番号	03-5561-0102
お支払先Eメール	sei@sei.co.jp
お支払先URL	http://www.sei.co.jp

● お支払先住所は必ず正確に入力してください。  
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<p>4. An email is sent from the insurance company.          (If you forget to take a screenshot of the payment number,          you can check it from the 'payment receipt number' in the email.</p>	<p style="text-align: center;"><b>Notice of completion of enrollment request acceptance</b></p> <p> Tokio Marine &amp; Nichido Fire Insurance Co.,Ltd. &lt;futaigakuso-web@d1.tmnf.co.jp&gt;          現売 ● KOBAYASHI Chiaki</p> <p> このメッセージから余分な改行を削除しました。</p> <p>Notice of completion of enrollment request acceptance _____          Dear t o k a i i c h i r o</p> <p>Thank you for using Sai-chan's Student Insurance website.          The enrollment request (Membership number : 001644Y2600002) for Comprehensive Insurance for Students Lives Coupled with PAS (Futaig;          *This email is not the subscription procedure completion notification. To complete the subscription procedure, you will be required to pay the</p> <p>Please bring the number below to a designated convenience store and make the payment of the prescribed amount within the due date.</p> <p>*If you wish to subscribe on the start date stated in the brochure, you must make the payment by the start date regardless of the payment date          *Please note that for mid-term subscription, the insurance period will begin on the following day after the payment date.</p> <p>*The enrollment request will be cancelled automatically and payment cannot be made thereafter if the payment is not made within the due date.</p> <p>■Enrollment application request details _____</p> <p>Enrollment type : A type</p> <p>Total payment amount : 6,605 yen          Breakdown          Insurance premium : 6,330 yen          System usage fee : 275 yen</p> <p>Designated convenience store : Seven-Eleven</p> <p>Payment deadline : 2026/4/25</p> <p>Payment receipt number : 7271088387069</p> <p>Phone number : *****3011          The phone number is hidden except the last four digits because it is a personal information.          The phone number was registered with the application for the ID.          (Please bring this number to the convenience store.) *The registered phone number with the application ID is required if Seicomart is design</p>
<p>5. Payment of insurance premiums</p>	<p>At the convenience store (Seven-Eleven) checkout, display the barcode you saved previously or state "payment receipt number" to pay the insurance premiums.          During the campus tour, a tutor will accompany you to the convenience store and assist with the procedure.</p> <p><b>Please note that card payments are not accepted; kindly bring cash with you.</b>          (You will receive change, so it's fine if the amount isn't exact)</p>