

## The 19<sup>th</sup> Japanese Speech Contest Application Form

Name( <i>Katakana</i> )			
Name ( <i>Kanji</i> /Alphabet)			
Sex	Male · Female	Nationality	
Date of Birth	Year	Month	Date (Age: )
Address	Zip Code 〒      -		
	Tel (      )      -      /Cell Phone      -      -		
	Fax (      )      -		
	E-mail :		
Occupation	Company Name:      (Type of Work:      )		
	Company Address :      TEL (      )      -		
Student	School Name      (Major :      )		
	School Address      TEL (      )      -		
<p>■Please answer the following:</p> <p>・ How long have you lived in Japan ? (      years      months)</p> <p>・ What is your native language ? (      )</p>			
Title of Speech			

Apply to: \*Fuji Association for International Relations  
(Fuji City Hall, International Affairs Office)  
〒417-8601 1-100, Nagatacho Fuji-shi      TEL : 0545-55-2704      FAX : 0545-55-2864

**Application deadline : No later than December 24th (Fri)**