

The 20th 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 23th (Fri)