

Japanese Shadow Play Competition

May 6th 2012 (Sunday)
REGISTRATION FORM



School/University/Institution: _____
Year: _____

Name of Contestants:

1) NRIC:	_____	Mobile phone no.: Email:	_____
2) NRIC:	_____	Mobile Phone no. : Email:	_____
3) NRIC:	_____	Mobile Phone no. : Email:	_____
4) NRIC:	_____	Mobile Phone no.: Email:	_____

We, the undersigned, hereby accept and agreed to abide by the rules and regulations of Japanese Shadow Play Competition as stipulated <http://www.jlsm.org/jlsm-6th-annual-japanese-language-festival.html>.

1) _____ Signature and Date	3) _____ Signature and Date
2) _____ Signature and Date	4) _____ Signature and Date

FOR OFFICE USE ONLY	
Status: Approved / Reject	_____ AUTHORISED SIGNATURE
Date of Receipt:	