

2017 高雄醫學大學語言與文化中心

在地週競賽活動報名表

2017 KMU The Center for Language and Culture

Chinese Week Contest Registration Form

| | |
|--|--|
| 參賽類別 The category for contest (務必勾選) (Please mark which category you will be participating in.) | <input type="checkbox"/> 中文說故事比賽 Chinese Story-telling Contest (參賽者身分限外籍生 The contestants must be non-Chinese native speakers.) |
| | <input type="checkbox"/> 中文朗讀比賽 Chinese Reading-aloud Contest (參賽者身分限外籍生 The contestants must be non-Chinese native speakers.) |
| 姓名 name | |
| 系 級 department | 系/所 major 年級 grade |
| 學 號 Student ID | |
| 聯絡電話 Cellphone number | |
| 電子信箱 E-mail | |

本人_____（請親筆簽名）已詳細閱讀本活動競賽原則並符合規定之競賽資格，如經查證競賽身分不符(例如：六足歲後曾在各地區中文(含雙語)學校就讀滿三年以上者，不得參加比賽不得參加比賽)或有其他違反競賽原則事宜，願自動失去競賽資格並繳回獲獎獎狀、獎品。

I _____(Signature of Contestant) have read the rule of contest and I am qualified to participate in the contest. If I am not qualified (e.g. anyone who has studied at the Chinese (bilingual included) schools at any areas around the world for more than 3 years after 6 years old is disqualified from the contest.), I will return both my certificate of merit and the winning prize.