

參賽表格

光·影—意大利巴洛克藝術大師·卡拉瓦喬
卡拉瓦喬《以馬忤斯的晚餐》繪畫比賽

學校名稱 (英文)	學校名稱 (中文)
聯絡電話：	傳真號碼：
地址：	
負責老師：	
(1) 姓名	(2) 姓名
電郵：	電郵：
電話：	電話：

	學生姓名 (英文)	學生姓名 (中文)	組別 (請在適當位置加上✓)			
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- 如參賽學生多於 20 人，請另交表格
- 請把表格電郵 educationhk@asiasociety.org 或傳真 2524 1099
- 查詢請致電 2103 9568/ 2103 9512

_____ (學校名稱) 聲明上述所填資料皆為正確，而所交之作品為參賽者原創作品。
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(簽署) _____
 姓名：
 職位：

_____ 日期：

Entry Form

Light and Shadows – Caravaggio • The Italian Baroque Master Student Drawing Competition

Name of School	Name of School (in Chinese, if applicable)
Telephone no.:	Fax no.:
Address:	
Teacher(s) in charge	
(1) Name:	(2) Name:
Email:	Email:
Telephone no.:	Telephone no.:

No.	Name of Student	Name of Student in Chinese (if applicable)	Category (please ✓ where appropriate)			
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- Please fill in additional form(s) if more than 20 entries are submitted
- This form should be returned by email to educationhk@asiasociety.org, or by fax to 2524 1099
- Enquiries: 2103 9568/ 2103 9512

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Name:
Title:

Date