**7th Japanese Speech Contest**

**第７回日本語スピーチコンテスト**

**Consent Form**

Date: Saturday, March 9, 2019

Venue: Lecture Hall, Conference Center, New York University Abu Dhabi

Schedule:

1:00PM Doors Open

1:30PM~ Speech contest

4:00PM~ Awarding ceremony

I, , am the parent of

Mr. / Ms. .

I grant permission for my son/daughter to participate in the 7th Japanese Speech Contest held on Saturday, March 9, 2019.

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| --- | --- | --- |
| **Parent Name:** | | |
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|  | |
| **Parent Signature:** | | |
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\*Please send this form to [j.husam@ab.mofa.go.jp](mailto:j.husam@ab.mofa.go.jp) along with your application form.