**8th Japanese Speech Contest**

**第７回日本語スピーチコンテスト**

**Consent Form**

Date: Saturday, March 14, 2020

Venue: Auditorium, InterContinental 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 8th Japanese Speech Contest held on Saturday, March 14, 2020.

|  |  |  |
| --- | --- | --- |
| **Parent Name:** | | |
|  | |
|  | |
| **Parent Signature:** | | |
|  |

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