

FORM NO.1

ENTRY FORM

Please attach one of these forms to the lower right-hand corner of the back of each entry.

*Entries submitted without these forms will be disqualified.

50TH INTERNATIONAL CHILDREN'S ART EXHIBITION		COUNTRY	ENTRY NUMBER	
NAME		SEX	AGE	
		M <input type="checkbox"/>		
		F <input type="checkbox"/>		
TITLE				
SCHOOL NAME	TEACHER'S NAME			

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NAME		SEX	AGE	
		M <input type="checkbox"/>		
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TITLE				
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