**Traditional Cultural Costume Show**

**Registration Form**

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| --- | --- | --- | --- |
| Name |  | Student ID No. |  |
| Department |  | Class |  |
| Tel |  | Email |  |
| Number of Performers |  | Nationality |  |
| Note. If you have preferred music, please send it to Assistant Yang before December 12. |

Please contact Vicky Yang, if you have any questions. mail:100112@mail.wzu.edu.tw