

Date : / /	Organization seal :	
Contact Person :	(If there were broken facilities, repair cost would be deducted from the guarantee bond.)	
Director :		
Address :	TEL :	FAX :
e-mail:		
Receipt to :	Remitter Name :	
Bank Name : CHINA TRUST COMMERCIAL BANK Branch Name : JHONGSIAO BRANCH Bank Address : 1F, No.71, Sec.4, Jhongsiao E. Rd., Da-an District, Taipei City 106, Taiwan (R.O.C.) SWIFT CODE : CTCBTWTP Account No. : 185350003083 Account Name : TAIPEI NATIONAL UNIVERSITY OF THE ARTS 401 ACCOUNT Address : No.1, Hsueh-Yuan Rd., Peitou District, Taipei City 11201, Taiwan (R.O.C.)		
Deposit Refund :	Bank/Post	Branch , Account :
Title :		
A. Apply Item : <input type="checkbox"/> Perform <input type="checkbox"/> Video Recording <input type="checkbox"/> Sound Recording <input type="checkbox"/> Photography <input type="checkbox"/> Demonstration Perform <input type="checkbox"/> Speech <input type="checkbox"/> Visit <input type="checkbox"/> Others _____		
Attachment : <input type="checkbox"/> Event Proposal <input type="checkbox"/> Organization Introduction <input type="checkbox"/> Audio & Video Data <input type="checkbox"/> Others		
Time & Dates :	Estimated Number of Participants _____	
Since / / /(time) :	to	/ / /(time) :
Set-up Time & Dates:		
Since / / /(time) :	to	/ / /(time) :
Performance Time & Dates:		
Since / / /(time) :	to	/ / /(time) :
Strike out Time & Dates:		
Since / / /(time) :	to	/ / /(time) :
Numbers of Performance : _____		
(Please attached with schedule if performances schedule is more than 1 day.)		
Event Content : (Title and Introduction 100-200 words)		
Application Venue : <input type="checkbox"/> Experimental Theatre <input type="checkbox"/> Dance Theatre <input type="checkbox"/> Concert Hall		
Performing Arts Center		
Administration Staff :	Technique Staff :	Director :
Date : / / /		