|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | 2019 Daejeon International Guitar Festival -  Application Form | | | | | |
| **Name** | *First / Last* | | | | | | Photo  (For identification) |
| **Sex** |  | | **E-Mail** | |  | |
| **Nationality** |  | | **Affiliation** | |  | |
| **Date of Birth** |  | | **Contact** | |  | |
| **Address** |  | | | | | | |
| **Name of the Teacher** | ※ For every teacher in two years that the participant have learnt for more than three months. | | | | | | |
| **Name of the Pieces** | **Classification** | | | **Composer** | | **Name of the Piece** | |
| **First** | **Set Piece** | |  | |  | |
| **Selection** | |  | |  | |
| **Second** | **Set Piece** | |  | |  | |
| **Selection** | |  | |  | |
| **Final** | **Selection** | |  | |  | |
|  | |  | |
| **Bank account information (For Prize)** | | | | | | | |

I pledge to comply with the rules of this competition in participating in the 2019 Daejeon International Guitar Competition organized by the DCAF.

**2019. xx. xx**

**Name** (Signature)

**Chairman of DCAF**

|  |
| --- |
| 2019 Daejeon International Guitar Festival  Personal Information Collection, Usage and Provision Agreement Form |
| *I (Name of Participant)* will Consent of information authority, special regulations of law, etc. In accordance with Articles 17 and 18 of the 「Personal Information Protection Act」, I agree to collect and use personal information as shown below.  2019. Month. Day  Name (Signature)  **※** Information about collecting personal information  DCAF would like to collect participants ‘Personal Information’ and ‘Personal Identification’  1. Purpose of Collection: For 2019 Daejeon International Guitar Festival, International Guitar Competition  2. Items of Collection: Identification, Name, Address, Contact, E-mail, etc  3. Retention Period: During 2019년 International Guitar Competition, destroyed at the end of the competition  4. DCAF do not use it for any purpose other than the contents agreed to by the personal information provider and if the provider wants to deny the use of the provided personal information, you may request to view, correct or delete it through the personal information manager  **☑ I have read about information collection and agree to collection of my personal information by DCAF** |