New Generation 2019 Application Form for Score Submission

Please print clearly.

Name :	(in Chinese)	(in English)
HKID No. :	Date of B	irth : / / Day / Month / Year
Postal Address (English)): 	
Contact Phone No. :	(Day)	(Night)
Email Address (please p	rint) :	
Institution and Educatio	n Level:	
Title of Work:		_ (in Chinese, if any)
		(in English)
Length of Work:	minutes	second(s)
The information provided will be used for	appropriate administration and communication	on purposes within the Hong Kong Composers' Guild only.
Office Use Only		
Date Received :		_
Result: Selected / Not	t Selected	