waac **Event Attended Application**

Applicant(s) 신청인		Individual	
		Corps	
Event			
Event Address			
Running Time 공연시간	Arrival time		
	Show start time		
	Shoe end time		
	Total hours worked		

Participant(참가자)

Participant(s) Name	P. Signature	Participant(s) Name	P. Signature

Note : 인원초과시 별첨

Applicant(s) 신청인			
Applicant(s) 신청인	Print Name		
	Signature		
	Phone		
	Date		

World Arirang Artist Center

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