

The 14th Toyota Dream Car Art Contest Entry Form

Your entry may not be eligible in case all information are not filled or correct.

① Age category:				2	Title	of the	e artv	vork:					
☐ 7 years old or under	☐ 8-11 years old		12-15 years										
③ Please explain about " Your *Explain in about three lines.	our Dream Ca	r"in th	e box be	low.									
Name of the applicant: in English Alphabet Please write down your name officially registered. (e.g. Passport name)	First Middle												
(F) Ago of the applicant:	Family												
S Age of the applicant:	Ye Date of birth:	ear		onth	Day		2 2	o O	1 0	(0 1	3	1
6 Gender of the applicant:	⑦ N	ame of	parent(s	s) or le	gal gu	ardia	n of	the a	pplica	ant*:	in Engl	ish Alpha	abet
☐ Male ☐ Female		Middle Family										\pm	
8 Postal address: Postal Code									Ţ]			
Country Address									<u> </u>]			
9 Telephone number and F Country Code Number Tel:	ax number (if	availab	ole): (10 E-m	nail ad	dres	s (if a	availa	able):				
How did you know abou Please choose one ansv Our website 2. SNS (Det Newspapers or Magazines)	ver from the lis	t below	. (optior 3. Yo	al que: ouTube	4. P			8. Ot	her (I	Detail	ls:)
	th Toyota Dream Car Art C e applicant's submission c	ontest. I/We of the artwork	hereby pledge	the full com title to the 1	pliance of a 4th Toyota	all the cla Dream	auses in t Car Art (the Entry Contest.	Termsa	Terms a	and ditions		
*Note: • If parent(s) can sign, please have the parent(s) • Also, if both parents are able to exercise parent • Only in the case neither parents can sign, pleas	al rights, please have both		ign. In case on	ly one of the	parents is	able to e	exercise	Date:	Year Year rights, on	e paren	t's sign v	Month will be ac	Day cceptable.
How to enter: Entry period [Submit your entry with your artwork and an entry In case one applicant submits multiple entries, ea	form together.		_	er.									
Entries: [insert address of the Enquiries: [insert Distributor	name], Admir		•	of Toy	ota Dr	eam	Car	Art C	onte	st			
Phone number: [insert phone number of the distri E-mail address: [E-mail address of the distributor	ibutor or dealer] of dealer] For adm	ninistrat	tion use	onlv (P	lease	 ძი n	ot fill	 in)					
Administration number (fill				, (1			untry	nam	ne & [ne

Administration number (filled by distributor)						
Age categ	ory		Accepted numb	per (by each category	/)	
(1) 🗆	(2)	(3)	Date accepted Year	(Please write in the V	Vestern calend	dar year.)

Country name & Distributor name Printed by distributor					
Dealer name	Filled by Dealer				