

PARTICIPANT'S PARTICULARS

	M/GROUP NAME:	INITOT/(Caran)	1	
FULL NAME (as in NRIC):	NAME IN CH	INESE(if any):		
NIDIO NO	405			
NRIC NO: GENDER:	AGE:		PHOTO	
	EMAIL:		РНОТО	
TELEPHONE NO:	MOBILE NO:			
ADDRESS:				
~ /				
SCHOOL/COLLEGE/UNIVERSITY	f:			
LEVEL:				
If in employment, please indicate	2:			
COMPANY NAME:				
POSITION:				
LANGUAGES or DIALECTS SPO	KEN:			
TALENT TO BE PERFORMED:				
TITLE OF THE PERFORMANCE :				
AUDITION DATE () Suria Shop	ping Mall, Kota Kinabalu,	Sabah (5 November 2	016)	
Please tick on your () Farley Superpreferable session	ermarket, Sibu (6 Novemb	er 2016)		
	ermarket, Bintulu (12 Nov	vember 2016)		
() Boulevard	Shopping Mall, Miri (13 No	ovember 2016)		
	Shopping Mall, Kuching (A STATE OF THE STA		
()	EMERGENCY CON	years and		
NAME.		TIONSHIP:		
NAME: TELEPHONE NO:		MOBILE NO:		
	PARTICULARS (For those I			
NAME:	RELATIONSHIP:	CONTACTS	NO:	
PARTICIPANT'S DECLARATION:				
I declare that the particulars are true suppressed any material fact. I authorise misrepresentation or permission of	orized investigation of all state	ement contained in this re		
Date		Sign	ature of Participant	

*IMPORTANT NOTE:

All entries to be submitted on or before 2 November 2016 (Wednesday) to Level 23 Wisma Sanyan,96000 Sibu or fax to +6084-320240 or email to borneotalentawards@gmail.com. Any enquiries please contact Ms.Teng +6084-333411 ext 205 or Mdm.Sylvia Lau via +6084-333411 ext 272.

SIBU MUNICIPAL COUNCIL