JAPANESE EXCHANGE PARTNERSHIPS EXPRESSION OF INTEREST YES, WE WOULD LIKE TO PARTICIPATE!	
Please complete all fields and return to Mrs. King in the Languages or Mathematics Office.	
STUDENT NAME	Male / Female
STUDENT GRADE	STUDENT AGE
PARENT/GUARDIAN NAME	
CONTACT NUMBER	
EMAIL	
I would like to participate in the Japanese Exchange Partnership by:	
☐ HOSTING A JAPANESE STUDENT (28 JULY TO 4 AUGUST 2019)	☐ ATTENDING THE JAPAN STUDY TOUR (26 SEPTEMBER TO 11 OCTOBER 2020 – TBC)