

Zhou Documents

February 2021

Invitation of "SOAP HAND" Art Program Partners

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Recommended Citation

LI 李强, Qiang, "Invitation of "SOAP HAND" Art Program Partners" (2021). *Zhou Documents*. 141.
<https://digital.kenyon.edu/zhoudocs/141>

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“SOAP HAND”ART PROGRAMME INVITES PARTNERS

Aim in “Soap Hand”engaging Partners is to make a “Soap Hand”copy of the partners hand. If you are interested in this commercial activity, you can give to those who love you but have no way of seeing or meeting you, the chance for a special experience. There are three kinds of special experience.

1. Special experiences others have had of you.
2. Special experiences you have had of others.
3. Special experiences you have had of yourself.

Form for partners to fill: Please attach a photograph

NAME:	SEX:
DATE OF BIRTH:	HEIGHT:
NATIONALITY RACE:	WEIGHT:
OCCUPATION EDUCATION:	BLOOD TYPE:
RELIGION:	EYESIGHT LEFT RIGHT:
MARRIAGE STATUS:	HEALTH:
ADDRESS:	MEDICAL HISTORY:

Please indicate clearly: colour of “Soap Hand” _____

Quantity of “Soap Hand” _____

Perfume type of “Soap Hand” _____

When marketing the “Soap Hands” in order for others to better understand you a 5 to 10 minute video of you will be filmed.

Thankyou for your co—operation

Artist: Li Qiang For inquires Ph. 7712933 Fax 7712933

Adress: No. 50 Building 25, North Chui Yang, Chao Yang District, Beijing.

Postcode: 100022

《香皂手》艺术方案聘请合作者

《香皂手》聘请合作者目的,根据合作者的“手”翻制“香皂手”通过商业活动使对您有兴趣,热爱您而无法见到无法与您接触人们获得特殊体验,特殊体验有三种:

- 一、他人对您的特殊体验。
- 二、您对他人的特殊体验。
- 三、自己对自己的特殊体验。

合作者请填写以下表格:并附生活肖像照片一张

姓名:	性别:
出生日期: 年 月 日	身高:
国籍: 民族:	体重:
职业: 学历:	血型:
宗教信仰:	视力:
婚姻与否:	身体状况:健康、一般、不好
住址:	有何病史:

* :请注明:“香皂手”使用颜色 _____
“香皂手”使用香型 _____
“香皂手”生产数量 _____

销售“香皂手”时为了让他人更好了解您,共同合作拍摄五至十分钟反映您录像片。

谢谢您的合作

艺术家:李 强 咨询电话:771. 2933

电传:771. 2933

地址:北京市朝阳区垂杨柳北区 25 楼 50 号

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