

APPLICATION FOR LITTLE MISS OR MASTER SKIPJACK

PERSONAL INFORMATION			
NAME:			
ADDRESS:			
PHONE NO:		BIRTHDAY:	
PARENT NAMES:			
HEIGHT:		WEIGHT:	
HAIR COLOR:		EYE COLOR:	

Give some interesting facts about yourself. Activities, School Activities, Pets, Siblings, Anything you would like us to know about you:

SCHOOL YOU ATTEND: _____ GRADE YOU ARE IN: _____

***** IMPORTANT *****

I have read and understand the official rules and regulations for entry in the Miss Skipjack Pageant, and the information listed here is true. I also agree to comply with all the rules and regulations, and will attend any functions requested of me, in clothes supplied by me.

SIGNED _____ DATE _____

PARENT OR GUARDIAN: _____