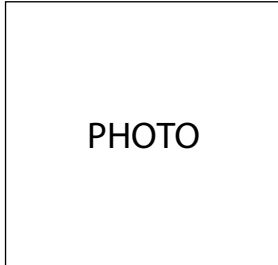




DOMINICA'S National Carnival Queen Pageant



CONTESTANT APPLICATION FORM



Contestant Name _____

Contact Telephone Numbers Home (767) _____

Work (767) _____ Cell (767) _____

Contact Email _____

Full Name _____ Life Ambitions _____

Address _____

What part of Dominica are you from? _____ Personal Statement _____

Are you single and childless? Yes No

Have you ever been convicted of a criminal offence? Yes No Describe your talent(s) _____

Date of Birth _____

Place of Birth _____ Measurements Height _____ Weight _____

Name of Parents/Guardians _____ Bust _____ Waist _____ Hips _____

Name of Employer [if applicable] _____ Hair Colour _____ Eye Colour _____

Email Address of Employer _____ Shoe Size _____ Dress Size _____

Last School Attended _____ Why do you want to participate in this pageant? _____

What language (s) do you speak? _____

Name, date and location of any previous beauty pageants [if applicable] _____

Titles obtained [if applicable] _____

THE FOLLOWING MUST ACCOMPANY THE APPLICATION FORM:

- *Passport-sized photo*
- *Valid police record*
- *Portfolio to include pictures*
- *Biography of yourself*
- *Academic achievements and qualifications (please provide certified copies of all certificates)*

I have read the above information in reference to the Dominica National Carnival Queen Pageant. I confirm that all the answers given to the above questions are true and correct to the best of my knowledge.

Signature _____ Date _____