

# West Coast Regional Talent Celebrity Pageant Application - Baby Debutante

Baby Miss 0-2

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (        ) \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age as of 5/1/16 \_\_\_\_\_

Parents Names: \_\_\_\_\_

Siblings Names & Ages: \_\_\_\_\_

Enjoys: \_\_\_\_\_

Favorite Toys: \_\_\_\_\_

Favorite Foods: \_\_\_\_\_

Sponsors: \_\_\_\_\_

Something Special About Me: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Checklist:**

- \_\_\_ Application completed and faxed to 916.663.4510. (both pages)
- \_\_\_ Deposit or Fee (mailed, paypal or call in cc)
- \_\_\_ Photo Emailed to westcoastpageants@live.com (min. 200 dpi)
- \_\_\_ Ad or wishline for program book (tiara awarded to contestant who sells the most ads in the program)
- \_\_\_ Entries paid in full by Earlybird Deadline, March 20, will receive (3) free optionals!

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### *For Office Use Only*

Contestant Name: \_\_\_\_\_ Number: \_\_\_\_\_

Date Received: \_\_\_\_\_ Fees Pd in Full \_\_\_ Yes \_\_\_ No Late Fee \_\_\_ Y \_\_\_ N

Vying for Debutante: \_\_\_ Yes \_\_\_ No Photo Received: \_\_\_ Yes \_\_\_ No