



MISS GREATER DERRY'S OUTSTANDING
TEEN OFFICIAL APPLICATION - PAGE 1 (DEADLINE 6/5/15)

NAME: _____
(As you wish it listed in the program book and newspapers)

PARENT/GUARDIAN(S) NAME: _____

DOB: _____ AGE: _____ GRADE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Home phone: _____ Cell phone: _____

E-mail: (Note if parents or your own) _____

SCHOOL: _____

EDUCATIONAL GOALS: _____

CAREER GOALS: _____

CONTESTANT TALENT REQUEST (1:30 max length-strictly enforced.) Registering your talent presentation is very important! If more than one contestant indicates the same selection, the contestant who first files her request has top priority for that selection!

TYPE OF TALENT: _____

FULL TITLE OF MUSIC YOU WILL USE WITH YOUR TALENT (include Broadway show title, movie, or literary work if applicable): _____

I hereby apply to be a contestant in the 2015 Miss Greater Derry's Outstanding Teen Program and include my **completed application**.

Checklist: These items must be supplied with this application in order for it to be considered complete.

- This page
- \$100 Entry Fee
- I have emailed one (1) jpeg head and shoulders photo to TheVoiceStudio@comcast.net
- Resume & Platform Statement
- *PLEASE INCLUDE 5 COPIES of resume & platform

Contestant's signature _____ Date _____

(Type name here) _____

Parent's Signature _____ Date _____

(Type Name Here) _____