

# Majestic Miss

## Scholarship Pageant

### Application

#### CONTESTANT PERSONAL INFORMATION

Pageant Location: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age as of 9/1/07: \_\_\_\_\_

School: \_\_\_\_\_

Sponsor: \_\_\_\_\_

#### PARENT OR GUARDIAN INFORMATION

Parent's/Guardian Name: \_\_\_\_\_

Parent's/Guardian Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent's/Guardian Email Address: \_\_\_\_\_

#### ACADEMIC ENTRY

Circle One: Book Report, Written Poetry, Science Fair Project, Sketched Art,

Painted Art, Other

Give a brief description of what you are presenting and how you came about working on the project:

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#### TALENT ENTRY

Circle One: Vocal, Dance, Play Instrument, Dramatic Interpretation, Vocal

Poetry Reading, Other

Name of Music: \_\_\_\_\_

Please describe talent performance:

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Please describe any assistance needed from Technician regarding, lighting, when music begins etc.:

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#### SIGNATURES

Parent's/Guardian Signature:

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Contestant Signature:

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Date:

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**Please Mail all Pageant Documents and Fees to the following:**

**Majestic Miss Scholarship Pageant  
P.O. Box 111756  
Carrollton, Texas 75011**

**Make all Checks payable to Metropolitan Charm & Modeling**