

Candidate & Parents Contact Information Form

Candidate Information

Candidate's F Legal Name:	iull			Miss		
-				Local Title		
Phonetic Spe	elling:					
	Phor	netic Spelling of Canida	te Name for Stage Announ	cements		
Birth Date:		A	Social			
		Age:	Security No.			
Type of Talent & Music:						
Social Impact						
Statement:						
Permanent						
Address:						
	Street Address			City & State	ZIP Code	
Cell Phone:			Hometown:	01: 0.0:		
C				City & Stat	re	
E-mail Addres		and he week all for	the time calcal is		tre in Tules.	
Your	r address where you		om the time school is	out until you arr	ive in Tuisa:	
		Date	school is out:			
Address:				Ott. O Ott.	7/0.0	
	Street Address			City & State	ZIP Code	
		Parent	s Information			
Mother's Full	Name:					
Address:						
	Street Address					
	on our riddross					
	City			State	ZIP Code	
Home Phone:	•		Cell Phone:			
Ducinoss Dho			-			
Business Pho	ne:	E-N	Лail Address:			
Father's Full	Name:					
Address:						
	Street Address					
	City			State	ZIP Code	
Home Phone:			Cell Phone:			
Business Phone:			— Mail Address:			
		E-IV	viaii Auui Ess.			
If one or b	oth parents are dece	eased, or if parents	s are separated, pleas	e indicate that in	formation here.	