

OFFICIAL APPLICATION



Please read this application carefully and provide all information required, including contact information for references who can attest to your community involvement, charity and volunteer work. If more space is required, please provide additional sheets and label all sections. **(Please use blue or black ink)**

SECTION "A"

Name:	
Address:	
City or Town:	Postal Code:
Email Address:	Telephone Number:
Date of Birth:	Age:
School:	Grade:
City or Town representing (if different from above):	
Career Ambition:	
Languages spoken or written:	

SECTION "B"

Honors and Awards:

Community Involvement / Volunteer Work:

Work with Charitable Organizations:

Clubs or groups you are affiliated with:

SECTION "D"

Will you be competing for the Talented Teen Award? _____

Participation in this competition is optional and not counted towards a contestant's final score. It is, in fact, a fun time for the contestants to compete in the performing arts of dancing, singing, acting, playing a musical instrument, or a combination thereof. First, second and third place awards are presented.

We ask that you supply your own musical accompaniment (eg: cds or cassettes, instruments, props, accompanists).

If required, please specify what special equipment you will require for your performance (ie: lapel mic, D.I. Box for guitar, piano:

If you are entering in this competition, what will be your performing art? _____

Please provide the title and original artist of your vocal/instrumental/dance selection:

SECTION "E"

References who can attest to our community involvement, volunteer and charity work

Reference #1

Name:	
Affiliation to you:	
Address:	Telephone Number:

Reference #2

Name:	
Affiliation to you:	
Address:	Telephone Number:

Reference #3

Name:	
Affiliation to you:	
Address:	Telephone Number:

SECTION "F"

Contestant Declaration and Parental Consent

By completing this application, I hereby state that all information contained therein is true. Any misrepresentation of the truth is cause for immediate disqualification from the competition.

Contestant Name: _____

Contestant Signature: _____

Name of Parent/Guardian: _____

Signature: _____

Date: _____

IMPORTANT

In addition to submitting this application, you must also provide the following:

- (a) A recent headshot (5x7) only, color or black and white, to be used for the program book, website and promotional poster.
- (b) The application fee for the Miss Teen Achievement Scholarship Program is \$350. Contestants are encouraged to obtain sponsors. **A \$100 non-refundable deposit is required with the application** (or you may pay the entire fee of \$350). If you are just sending the \$100 deposit, all other remaining fees must be paid in full by September 17, 2010.
- (c) A copy of your birth certificate as proof of age.

Please mail your application, photo and applicable fees to:

Miss Teen Achievement Newfoundland and Labrador Incorporated
P.O. Box 39061
St. John's, NL
A1E 5Y7

If you have any questions, please telephone us at: 709.895.8588 or email: contact@missteenachievement.com

Deadline for applications is: July 31, 2010