

BRIDGE CITY GUMBO FESTIVAL

BEAUTIFUL CHILD CONTEST ENTRY FORM

Child's Name: _____

D.O.B. _____

_____ Boy _____ Girl Age by Date of Contest _____

T Shirt Size _____

Information about the contestant: Please choose 3 to fill out.

Favorite Food _____

Favorite Color _____

Favorite Toy _____

Favorite TV Show _____

Two of my favorite things I like to do:

1) _____

2) _____

Two words that best describe me are:

1) _____

2) _____

Parent/Guardian Name: _____

Address: _____

Phone: _____ e-mail: _____

Optional Contests:

_____ Most Photogenic – Age Division \$5

_____ Overall Most Photogenic \$10

_____ Overall Most Handsome / Most Beautiful \$10

_____ Overall Fashion \$10

Total Paid for Additional Contests \$ _____

Ticket Numbers _____ Registration \$10 _____

Total Tickets Sold _____

AGE DIVISION _____