

2024 MISS & TEEN GONZALES JAMBALAYA PAGEANT

CONTESTANT NAME:		
MAILING ADDRESS:		
CITY:	STATE:	ZIP:
EMAIL:	PHO	NE NUMBER:
SPONSOR:		
PARENTS:		
AGE:	DATE OF BIRTH:	
nich school ·	EDUCATION	VEAD CDADUATED.
HIGH SCHOOL:		
COLLEGE:COLLEGE CLASSIFICATION:		
SCHOOL ACTIVITIES:		
HONORS/AWARDS:		
VOLUNTEER WORK / EMPLOYMENT:		

AMBITIONS:
MOST ADMIRED PERSON (OTHER THAN A PARENT) AND WHY? :
WHY DO YOU WANT TO BE THE NEXT TEEN/MISS GONZALES JAMBALAYA?
F YOU WERE ASKED TO PROMOTE THE JAMBALAYA FESTIVAL, HOW WOULD YOU DESCRIBE IT?
WHAT WOULD YOU CONSIDER TO BE YOUR BEST PERSONAL QUALITY AND WHY?
WHAT WOULD TOO CONSIDER TO BE TOOK BEST PERSONAL QUALITY AND WITT!
TELL US SOMETHING ABOUT YOURSELF NOT ASKED ON THIS QUESTIONNAIRE:

APPLICATION MUST BE TYPED AND FIT IN THE BLANKS PROVIDED.

I PROMISE TO COMPLY WITH ALL THE RULES AND REGULATIONS THAT GOVERN THE TEEN/MIS GONZALES JAMBALAYA PAGEANT, AND I ACKNOWLEDGE THAT THE ABOVE PERSONAL DATA IS ACCURATE AND TRUE.
Contestant Signature
Parent/Guardian Signature