**2019 STATE COMPETITION GENERAL INFORMATION SHEET**

|  |  |
| --- | --- |
| Local Title: | 🞎Miss Delaware 🞎 Miss Delaware’s Outstanding Teen |
| FULL NAME |  |
| SOCIAL SECURITY NUMBER |  |
| AGE |  |
| DATE OF BIRTH |  |
| HOME STREET ADDRESS |  |
| CITY |  |
| STATE |  |
| ZIP  |  |
| HOME PHONE NUMBER |  |
| CELL PHONE NUMBER |  |
| EMAIL ADDRESS |  |
| PARENTS’ NAMES |  |
| PARENTS’ STREET ADDRESS |  |
| CITY |  |
| STATE |  |
| ZIP |  |
| PARENTS’ PHONE NUMBER |  |
| PARENTS’ EMAIL ADDRESS |  |
| SCHOOL ADDRESS (if different) |  |
| CITY |  |
| STATE |  |
| ZIP |  |

Please mark any of the boxes below that may apply to you.

ELIGIBLE UNDER THE FOLLOWING:

☐ RESIDENCY ☐ SCHOOL ☐ EMPLOYMENT

TALENT:

|  |  |  |
| --- | --- | --- |
| ☐ DANCE | ☐ VOCAL | ☐ INSTRUMENT |
| ☐ BATON | ☐ DRAMA | ☐ OTHER\* |

\*PLEASE SPECIFIY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE OF YOUR TALENT PIECE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_