



2021 Beech Baby & Miss Festival of the Lakes

CONTESTANT INFORMATION

Please PRINT

Contestant's Name:

Parent's Names: _____

Address: _____

City: _____ State: _____

Telephone Number: _____

Email Address: _____

STAGE INFORMATION

(To be read on stage by emcees)

Complete the following in the space available:

Age: _____ Hair Color: _____ Eye Color: _____

Hobbies/Interests: _____

Name 3 words that describe you: _____

Where would you go on your dream vacation? _____

If you could spend the day with a celebrity who would it be? And why?

Must arrive 30 minutes before your pageant start time