

CONTEST

MISS



2020

PARTICIPATION FORM

Accreditation No. EIDA _____

Surname and names _____

Birthdate _____

Age _____

Passport number _____

Address _____

City _____

Province _____

Postal Code _____

Phone _____

Mobile _____

E-mail _____

School _____

Teacher _____

Level _____

Coursed years _____

MUSICAL SELECTION

Style _____

Name of the song _____

Duration _____

SIGNATURE

ACLARATION