

## MISS UNIVERSE BAHAMAS

### 2016 Contestant Application

#### *Are You Our Next Queen?*

The Miss Universe Bahamas mission is to empower young ladies to own their personal value and invest it into creating a better world...this we deem to be **'Living Beautifully.'**

This contest is open to all female citizens of The Bahamas who are between 18 and 27 years of age before January 1, 2016.

**TO APPLY:** **\*Deadline July 2, 2016\***

**There is a \$250.00 BSD application fee for all Miss Universe Bahamas applicants. Please make cashier's check payable to: Ivy Lane Ltd.**

#### **Application Items:**

- 1. Contestant Application form**
- 2. One headshot photo**
- 3. One swimsuit photo**
- 4. Copy of valid Passport**
- 5. Application fee**

**Please hand deliver all application items to:**

**Miss Universe Bahamas  
Attn: Michelle Collie  
Ivy Lane Ltd.  
303 Shirley Street  
Nassau, Bahamas**

Applications are not accepted unless all of the above items are complete.

By signing and submitting this Contestant Application you agree to the terms and conditions set forth by the Miss Universe Bahamas available for review at [www.missuniverse-bahamas.com](http://www.missuniverse-bahamas.com). Eligible contestants should not have been married, given birth to a child or currently pregnant, not a step-parent or legal guardian of a child, and without criminal record. These terms and conditions are effective upon the acceptance of your application.

Send us your questions or comments at [info@missuniverse-bahamas.com](mailto:info@missuniverse-bahamas.com).

**General Information**

FULL NAME		EMAIL ADDRESS	
AGE		DOB	

PASSPORT NUMBER		DATE OF ISSUE	
CITIZENSHIP		DATE OF EXPIRATION	

PERMANENT HOME ADDRESS	

HOME PHONE		MOBILE PHONE	
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**Family Background**

FATHER'S NAME		NATIONALITY	
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MOTHER'S NAME		NATIONALITY	
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BAHAMIAN HERITAGE - From which Island(s) does your family lineage stem?	
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**Educational Background**

FROM	TO	SCHOOL / COLLEGE	LEVEL ACHIEVED
HONORS/SPECIAL AWARDS			

**Employment Background**

FROM	TO	NAME OF EMPLOYER	POSITION

CURRENT ENDORSEMENTS/CONTRACTS/AGREEMENTS: Oral and/or Written	
Yes, with...	
Nature of Agreement	

**Pageant Experience**

NAME OF PAGEANT	TITLE	YEAR

**Medical Information**

Do you have any medical conditions that we should be aware of?	
Medications?	
Allergies?	
Have you been sick lately or undergone surgery? If yes, please specify.	

**More About You**

What is your favorite book?	
Who is your favorite author?	
Favorite celebrity and why?	
Favorite Sport?	
Hobbies?	

What do you want to accomplish in your lifetime?
What do you believe is the role of beauty pageants in today's society?

Tell us what you think 'Living Beautifully' means...

SIGNED		DATE	
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