Miss Downtown Honolulu, Miss Ala Moana
Local Preliminary Contestant Application

The information contained in this document is not intended for judge's review.

Local Preliminary _____

Full Name _____

Social Security Number _____ Birth Date _____ Age _____

Home Address _____

Home City, State, Zip _____

Home Phone _____

Home Email Address _____

School Address (your mailing address) _____

School City, State, Zip _____

School Phone _____

School Email Address _____

Official Age Indicator for Miss Hawaii 2008 and Miss America 2009

"No older than twenty-four (24) years of age on
December 31, 2008 (for Miss America 2009)."

Complete Application fully and mail to:
Shaina Caporoz
Miss Downtown Honolulu/Miss Ala Moana
PO Box 37006
Honolulu HI 96837-0006

High School _____
(Name of School / Date Graduated)

College _____
(Name of School / Degree Sought)

College Major _____ _____ Declared Minor _____

Scholastic Honors _____

Scholastic Ambition _____

Career Ambition _____

Other Accomplishments _____

Type of talent you will present _____ Title of Song/Presentation _____

Special training in music, drama, dance, art _____

Employment Experience _____

Father's Name / occupation _____

Mother's Name / occupation _____

Names, ages of brothers and sisters _____

Other interesting facts about yourself :

The Miss America Organization encourages the young women who participate in the program to become involved in their communities to speak out on issues of concern to them, their community and the nation. If selected the winner of this competition, what issue would you choose to focus on during your year of service?

Give the complete name of other Local and/or State Pageant titles awarded to you and if you completed your year of service:

I acknowledge that I am a United States Citizen (must provide birth certificate) and meet ONE of the following residency requirements:

☐ _____I am and have been a resident the of the state of Hawaii for the last six months (Must provide 2 proofs of residency)
☐ _____ I am and have been a full time employee within the state of Hawaii for the last six months (Must provide proof of current employment status)
☐ _____ I am and have been a student within the state of Hawaii for at least one semester – 12 hours (Must provide proof of current scholastic status)

Please list any special medical or dietary information we need to be aware of:

I understand by signing below that I am applying to be a contestant to the local preliminary listed above. Once I sign this and return it to the Local Executive Director, they will send me all of the necessary information to officially become a contestant in their local. Once I sign the Official Contestant Contract and return it with any other necessary paperwork required from the local and it is accepted by the local, I will then be officially enrolled into the local.

Print Name _____

Signature _____

Date _____