

# Please complete the card(s) below and bring them to Pageant Check-In.

Please complete the following Optional Contest Card(s) for the Optional Contest(s) that you plan on participating in.

- Please bring the Optional Contest Card(s) to Pageant Check-In. (Do not mail them to the pageant office.)
- All cards should be printed neatly in dark ink or typed.
- Please cut your cards before you arrive to Pageant Check-In.



CUT HERE

JR. TEEN  
# \_\_\_\_\_  
This space for office use only.

**OPTIONAL**

# Actress Card



NAME ..... (FIRST) ..... (LAST) ..... AGE.....

FAVORITE ACTRESS .....

FAVORITE MOVIE .....

See your Magazine #2, page 11, for details about this contest.



CUT HERE