

GOLDEN GLOBE ENTERTAINMENT
Miss Legs Beauty Pageant

INITIAL APPLICATION

2009 Miss Legs Beauty Pageant

FULL
NAME _____ AGE _____ BIRTHDAY _____
SOCIAL SECURITY#-----BIRTH CERTIFICATE AVAILABLE?
YES/NO _____.

I am hereby applying to the 2009 Miss Legs Beauty Pageant USA, scheduled for February 2009 (subject to change) at a site to be determined. I understand the pageant is not a preliminary to the 2009 Miss Legs Beauty Pageant USA pageant.

The nonrefundable application fee for the Miss Legs Beauty Pageant USA pageant is \$200.00. I understand I will be notified through email within 10 working days of receiving my completed application by Miss Legs Beauty Pageant USA of the receipt of my application. I understand that I will be notified through email by September 1st, 2008 if I have been chosen to participate in the Miss Legs Beauty Pageant, U.S.A., followed by registration directions. I understand I must mail this signed application form, a cashier's check or money order for the nonrefundable \$200 application fee made payable to Miss Legs Pageant USA, along side a picture of my legs, to the address provided below. I understand that the signed application, a picture of my legs and the \$200 nonrefundable application fee is due no later than August 9th, 2008.

I understand I must be a U.S. citizen, and that I must meet the age requirement; **category one** 18-35, **category two** 36-45, **category three** 46-55, **category four** 56-65 and beyond.

Applicant's Signature

Date

Address (mail) _____

Street

City

Zip

Home Telephone () _____ Cellular Phone () _____

Email _____

Have you ever crowned before, Yes/No _____ if your answer is yes, when and where?

NONREFUNDABLE APPLICATION FEE (\$200.00) ENCLOSED _____

PICTURE OF MY LEGS ENCLOSED _____

APPLICATIN FORM ECLOSED AND SIGNED _____

REMINDER: DUE ON OR BEFORE August 9th, 2008