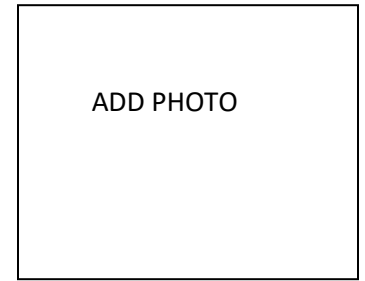


Steph Foundation



MISS STEPH 2022/2023

CONTESTANT REGISTRATION FORM

NOTE: EVERYTHING MUST BE FILLED

SECTION A

1) _____

SURNAME

OTHER NAMES

2) _____ 3) _____ 4) _____

NATIONALITY

STATE OF ORIGIN

LOCL GOVT. AREA

5) RESIDENTIAL ADDRESS _____

6) DATE OF BIRTH DD/MM/YY _____ 7) PLACE OF BIRTH _____

8)HOBBIES _____ 9)OCCUPATION _____

10) LANGUAGES:

ENGLISH FRENCH OTHERS INDICATE _____

11) MARITAL STATUS _____

14) COMPLEXION _____ 15) HEIGHT _____

16) EYE COLOUR _____ 17) HAIR COLOUR _____

18) ANY HEALTH ISSUE: YES/NO (IF YES INDICATE) _____

19) _____ 20) _____

MOBILE NUMBER

EMAIL ADDRESS

21) EDUCATIONAL STATUS:

A STUDENT UNDER-GRADUATE A GRADUATE OTHERS

22) NAME OF SCHOOL _____

23) WHAT MOTIVATES YOU ABOUT WINNING THIS CROWN

24) SCHOOL ADDRESS _____

25) HOW DO YOU GET TO KNOW ABOUT THE MISS STEPH PAGEANT ?

FLIERS SISL WEBSITE BLOG GOOGLE

WHATSAPP INSTAGRAM

SECTION C

ONLY FOR THE UNDER AGED CONTESTANTS

26) _____

NAME OF PARENTS(S)/GUARDIAN

27) _____

RESIDENTIAL ADDRESS OF PARENT(S)/GUARDIAN

28) _____

PARENT(S)/GUARDIAN MOBILE NUMBER(S)

BY FILLING THIS FORM, I GIVE CONSENT FOR MY CHILD TO PARTICIPATE IN STEPHANO INTEGRATED SERVICES LTD (MISS STEPH).

SECTION D:

I _____ THE CONTESTANT CERTIFY THAT ALL
INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

SIGNATURE & DATE

REGISTRATION REQUIREMENT

SEND A HEADSHOT AND BODY STATISTICS WHATSAPP TO +234(0)8109632851

GOODLUCK