



PA's Outstanding Teen Application for a Local Competition

NAME _____ AGE _____ DATE OF BIRTH _____

ADDRESS _____ School Grade _____

_____ Current GPA _____

Contestant Phone(s) _____

Contestant Email _____

School _____

Platform Statement _____

Talent _____

Talent Song _____

Mother _____ Phone & Email _____

Father _____ Phone & Email _____

Please fill out the numbers below for statistic purposes.

Children's Miracle Network Hospitals:

Contestant Platform Issue:

Donated Hours: _____

Donated Hours: _____

Money Fundraised: _____

Money Fundraised: _____

Please Send All Paperwork ASAP.

All information must be factual. False information may result in your disqualification from the competition.

You are an official candidate when your Entry Fee is paid and paperwork is received.

All Teen candidates are required to register with CMNH and the Local Competition you are competing in for 2021 year.

MPAOTeen Contract will be sent when paperwork is received.

Contracts must be completely filled out with initials on each page and required notarized signatures.

Bring the contract with you to the competition. The Local must have this for you to compete.

Please send your Application, RESUME & CRITICAL ESSAY via email. NO PDF files.

A Signed Application via U.S. Postal Service along with your entry fee & Birth Certificate Copy.

ALL Information Must be typed on all the required entry forms.

Please E-Mail your Headshot PHOTO as a jpeg file ASAP.

Money Order made out to: _____ for \$100.00

Executive Director: _____

Address: _____

Phone: _____ Email: _____

Applications are accepted on a first come first serve basis.

In completing this application, I give permission to the local competition organization to use my photographs and any videos taken for any and all purposes as a candidate of this local organization. Please understand that it is not always possible to receive photo credit. This application may be shared with other Miss Pennsylvania Local Preliminary Competition Executive Directors of the MAO.

Signature of Parent/Guardian: _____ Date: _____