*MISS GHANA UK*

*APPLICATION FORM*

NAME:

ADDRESS:

 D.O.B: DD/MM/YYYY AGE:

TELEPHONE No: MOBILE:

EMAIL: OCCUPATION:

HOBBIES & INTERESTS:

MEASUREMENTS: Bust: Waist: Hips Slit length (hip to floor)

HEIGHT: DRESS SIZE: WAIST

DO YOU UNDERSTAND ANY GHANAIAN LANGUAGE? YES NO

DO YOU SPEAK ANY GHANAIAN LANGUAGE? YES NO

IF YOU ANSWERED YES TO THE ABOVE PLEASE SPECIFY WHICH LANGUAGE(S):

PLEASE TICK WHICH TIME IS SUITABLE FOR YOU TO ATTEND REHEARSALS

SUNDAY: 3-7 3 4-8

PLEASE ATTACH TWO PHOTOGRAPHS (ONE FULL LENGTH AND A FACE SHOT)

I have transferred £60 registration fee into Miss Ghana UK bank account - A/C: 06 45 55 60 S/C: 08-71-99.

SIGNED DATE