

Fashion Show & Beauty Bazaar

MODEL REGISTRATION

Name of Participant: _____ Age: _____

CONTACT:

Phone Number (main): _____ Email Address: _____

Address: _____ Times Available to Contact: _____

Emergency Contact: Name: _____ Phone: _____

Dress Size: _____ Suit Size (if male): _____

Height: ___ft ___in Shoe Size: _____

Doctor's Name: _____ Clinic: _____

Allergies to be aware of: _____

Note: If you participate in the fashion show, women are required to bring one or more pair of heels and one or more pairs of flats in colors of: Black, White or Tan. Men are required to bring one or more pairs of dress shoes and one or more pairs of regular shoes in colors of: Black, White or Tan. **Each participant is required to be available for a fitting session one week before the event.**

By signing below you have agreed to participate in the Fashion Show and Beauty Bazaar located at 811 Main St. This is a fundraisers, we will not be able to extend a "plus one" to family members or friends. Thank you for understanding.

Models give The Creativity Collective permission to use their name and photo in association with the event. Models must arrive at 811 Main at 5:30 pm. The Fashion show begins at 7.

Date: _____

Signature: _____

Signature of Guardian _____ (if under 18)