

MISS
POLONIA[®]
 C A L I F O R N I A
 L O S A N G E L E S 2 0 2 3 / 2 4

PARTICIPATION FORM

 First Name Last Name Citizenship Date of birth (month, day, year)

 Address (street, city, postal code, country) Place of birth (city, country)

 Mailing address (street, city, postal code, country)

 Phone (number, city, country) e-mail address

 Education

Application fee is \$75.00

 Height (cm) Weight (kg)

 Eyes color Hair color

Please, do not write in this box



Participant is obligated to:

- *make provisions for their own travel, lodging and food expenses during the contest*
- *provide their the evening dress.*
- *sign the model release for the use of all photographic and film material produced during finals exclusively to the organizer.*
- *agree to represent and promote in person the title during three Polish events within following year (for winners only).*

I, signed below....., declare my national Polish origin based on my direct Polish blood relationship. I also state, that I have read and understood the Rules of Beauty Pageant and that I fulfill all its requirements. With my signature, I guarantee that **a l l** information on this participation form are true.

Full signature: Date:.....