



2025 MISS & TEEN GONZALES JAMBALAYA PAGEANT

CONTESTANT NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE NUMBER: _____

SPONSOR: _____

PARENTS: _____

AGE: _____ DATE OF BIRTH: _____

EDUCATION

HIGH SCHOOL: _____ YEAR GRADUATED: _____

COLLEGE: _____

COLLEGE CLASSIFICATION: _____ MAJOR: _____

SCHOOL ACTIVITIES: _____

HONORS/AWARDS:

VOLUNTEER WORK / EMPLOYMENT:

AMBITIONS: _____

MOST ADMIRER PERSON (OTHER THAN A PARENT) AND WHY? : _____

WHY DO YOU WANT TO BE THE NEXT TEEN/MISS GONZALES JAMBALAYA?

IF YOU WERE ASKED TO PROMOTE THE JAMBALAYA FESTIVAL, HOW WOULD YOU DESCRIBE IT?

WHAT WOULD YOU CONSIDER TO BE YOUR BEST PERSONAL QUALITY AND WHY?

TELL US SOMETHING ABOUT YOURSELF NOT ASKED ON THIS QUESTIONNAIRE:

APPLICATION MUST BE TYPED AND FIT IN THE BLANKS PROVIDED.

I PROMISE TO COMPLY WITH ALL THE RULES AND REGULATIONS THAT GOVERN THE TEEN/MISS GONZALES JAMBALAYA PAGEANT, AND I ACKNOWLEDGE THAT THE ABOVE PERSONAL DATA IS ACCURATE AND TRUE.

Contestant Signature

Parent/Guardian Signature