

CONTESTANT INFORMATION SHEET

PREFERRED NAME _____ NO. _____
FOR STAGE USE ONLY

PHONE NUMBER _____

PLACE OF BIRTH _____ CURRENT RESIDENCE _____

OCCUPATION _____

HOBBIES 1. _____ 2. _____

3. _____ 4. _____

LIST SOME OF YOUR INVOLVEMENT IN THE GLBT COMMUNITY

1. _____

2. _____

3. _____

4. _____

WHY DO YOU WANT TO BE MS./MR. TGSF? --- 50 WORDS OR LESS

WHAT WOULD BE YOUR MS. TGSF AGENDA? --- 4 ITEMS ONLY

1. _____

2. _____

3. _____

4. _____

NAME _____ NO. _____

OTHER NAME _____

IF USED

PHONE NUMBER _____

E-MAIL _____

MAILING ADDRESS

1. CURRENT TGSF MEMBER – _____

2. DO YOU HAVE A PHOTO FOR PROGRAM? _____
E-MAIL OR GIVE ME THE PHOTO AND I WILL RETURN IT.

3. NEED TO KNOW TALENT PRESENTATION
YOU CAN CALL ME AND TELL ME YOUR ACT
OR E-MAIL IT. --- WRITE IT DOWN AND GIVE IT TO ME.

PRESENTATION DETAILS MUST BE FINALIZED AND GIVEN TO THE FACILITATOR
(LISA DUMMER) NO LATER THAN
DECEMBER 1, 2008.
No EXCEPTIONS!

****PRESENTATION CAN BE NO MORE THAN 5 MINUTES IN LENGTH***

4. NEED TO KNOW TECHNICAL NEEDS
MIKES, SPECIAL LIGHTING, ETC.

5. PROPS _____

6. TAPE _____ CD _____ LIVE _____ SPOKEN _____

SIDE _____ TRACK _____
ANY OTHER NEEDS