

Miss Bluffdale Scholarship Pageant
APPLICATION

Full Name: _____ Age: _____

Parents Names: _____ Phone: _____

Address: _____

High School: _____ Year Graduated: _____

College: _____ Date of Birth: _____

Talent to be preformed: _____

Project or Platform:

Future Goals: _____

Likes and Dislikes: _____

Interesting facts and achievements about you: (Including hobbies, clubs, school activities, awards, or honors won.) _____

Motto to live by: _____

Values: _____

Orientation for the Pageant is April 2nd at the Crane House from 10-12 noon. Applications are due at the Bluffdale City Offices on or before April 2nd. The Pageant is June 11th. Any further questions, please contact Robin Brown 253-4838, Trina Kalmar 254-6005, Melisa Pehrson 859-4800, or Ginger Garn 254-7334.

