

## Application

Piease write cleari	<i>y</i> :	
Full name (first, mid	dle, last)	
E-mail		
address	Phone	
School attending and	other activities:	
Grade	Birthday	Shirt size
Guardian/Father's N	ame	
Guardian/Mother's N	Name	
Marital status	E-mail a	ddress
Phone number		
of my child in publica		symphony Association to include photography & Beaus program including official websites,
Guidelines, and wish t result in my dismissal refund. Registration is	to participate and abide by the without a refund. Anyone we not considered complete un	Chart, Dress Code, Code of Conduct and he rules and guidelines. Failure to do so will who chooses to drop out will not receive a ntil payment is received. Space is limited. ot be allowed to be presented at the Gala.
=		ion.org/belles-beaus or mail to PO Box 405, ation to: wsabellesandbeaus@gmail.com
Belle/Beau		Parent/Guardian
Date		Date
	ny Assoc., \$375.00 Tuition (ect to a convenience fee.	\$400.00 after September 18, 2019). On-line