APPLICATION FOR LITTLE MISS OR MASTER SKIPJACK 2023

NAME:			·····
ADDRESS:			
		BIRTHDAY:	
PARENTS NAMES	S:		
			EYES:
	TIES, PETS, SYI	ΓS ABOUT YOUSEL BLINGS. ANYTHING	F. ACTIVITIES, G YOU WOULD LIKE
SCHOOL YOU AT	TEND:	GRADE Y	OU ARE IN:
ENTRY IN THE MISS : TRUE. I ALSO AGREE	SKIPJACK PAGEA TO COMPLY WI	TH ALL THE RULES AN	REGULATIONS FOR ATION LISTED HERE IS D REGULATIONS, AND THES SUPPLIED BY ME.
SIGNED:		DATE:	
PARENT OR GUARDL	AN:		