

# *The Swans Club 2024 Debutante Application*

NAME \_\_\_\_\_ AGE: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/ZIP \_\_\_\_\_

APPLICANT'S E-MAIL: \_\_\_\_\_

APPLICANT'S CELL PHONE: \_\_\_\_\_

PARENTS/GUARDIANS: \_\_\_\_\_

MOM'S CONTACT PHONE: \_\_\_\_\_ EMAIL \_\_\_\_\_

DAD'S CONTACT PHONE: \_\_\_\_\_ EMAIL \_\_\_\_\_

SCHOOL: \_\_\_\_\_ CITY: \_\_\_\_\_

HIGH SCHOOL CLASSIFICATION:      JUNIOR      SENIOR

OVERALL GRADE POINT AVERAGE: \_\_\_\_\_

SCHOOL ACTIVITIES, ORGANIZATIONS, CLUBS: \_\_\_\_\_

\_\_\_\_\_

HONORS: \_\_\_\_\_

CHURCH AFFILIATION: \_\_\_\_\_

CHURCH ACTIVITIES: \_\_\_\_\_

SOCIAL/CIVIC ORGANIZATIONS: \_\_\_\_\_

SPECIAL TALENTS: \_\_\_\_\_

HOBBIES: \_\_\_\_\_

\_\_\_\_\_

FUTURE EDUCATIONAL PLANS: \_\_\_\_\_

\_\_\_\_\_

DESCRIBE WHY YOU DESIRE TO BE A SWANS CLUB DEBUTANTE:

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