

**Miss California Organization
Local Pageant Entry Form – Attachment - A**

Pageant Name _____

Contestant Name _____ Date of Birth _____
Please Print

Contestant Email _____ Telephone _____

I have previously held the following Miss California/Miss America Local Preliminary Pageant Titles: (if none, enter NONE).

Year	Title
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I have previously held the following Miss California/Miss America Outstanding Teen Titles: (if none, enter NONE)

Year	Title
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Contestant Signature

Date