



# National Carnival Committee

www.SKNCarnival.com

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## REGISTRATION FORM A — SKNNCC NATIONAL CARNIVAL SWIMSUIT PAGEANT

| PERSONAL INFORMATION   |   |   |  |            |
|--|---|---|--|------------|
| Candidate's Complete Name: (First, Middle Initial, Last):                          |   | Biological Gender:<br><input type="checkbox"/> Male <input type="checkbox"/> Female |  | Date:      |
| Date of Birth: (dd/mm/yy)  | St. Kitts/Nevis Citizen <input type="checkbox"/> YES <input type="checkbox"/> NO<br>St. Kitts/Nevis Legal Resident <input type="checkbox"/> YES <input type="checkbox"/> NO | Your Age by date of this Event:<br>_____ yrs _____ months                           |  |            |
| Current Place of Residence:  | Highest Academic Qualification:   | Name of School/Place of Employment:   |  |            |
| Home #:  | Work #:   | Cell #:   |  |            |
| Email Address: Write clearly to receive communications in a timely manner:         |   |   | Contact Person in the event of an Emergency: |            |
| Have you ever participated in similar Competitions before?<br>If YES, please list: |   | List three adjectives that one would use to describe you:                           |  |            |
| Weight (lbs):  | Height: (feet/inches)   | Shirt Size:   | Shoe Size:                                   | Pant Size: |

|                                  |                   |
|----------------------------------|-------------------|
| Company Sponsor (if applicable): |                   |
| Hobbies:                         | Facebook Account: |
| Name(s) of Coach(es)             |                   |

Having read, understood, signed, and submitted this document (Registration Form A) to the St. Kitts Nevis National Carnival Committee, I am confirming that I have collected Registration Forms A and B, as well as, the Policy Statement containing the Rules and Regulations of the above referenced Competition. I also understand that to complete the Candidate Registration Process, I must complete and return Form B by the stipulated deadline. As such, this shows that I have read, understood, and agreed to participate in the National Swimsuit Pageant and comply with the respective Rules and Regulations.

|  |   |
|--|---|
| Candidate Signature:                     | Date:   |
| Name of Parent/Guardian (if applicable): | Signature of Parent/Guardian (if applicable): |

**DO NOT WRITE BELOW THIS LINE**

|  |                            |
|--|----------------------------|
| Name of Office Attendant Receiving Form: | Date of Receipt of Form A: |
| Office Signature:                        | Application #              |

