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ANTIGUA & BARBUDA FESTIVALS COMMISSION
APPLICATION FOR MR. & MRS. TEEN COMPETITION:
(TO BE COMPLETED IN DUPLICATE)

NAME: _____

ADDRESS _____

DOB: DD / MO / YR AGE: _____ SEX: _____ EMAIL: _____

PLACE OF BIRTH: _____ CITIZENSHIP: _____

NAME OF PARENT OR GUARDIAN: _____

ADDRESS: _____

CONTACT NUMBERS: _____ (H) _____ (W) _____ (C)

NAME OF SCHOOL: _____

FORM / CLASS: _____ ADDRESS: _____

HAVE YOU PREVIOUSLY PARTICIPATED IN ANY TALENT CONTEST? Yes / No. IF YES, STATE THE NAME OF THE CONTEST, YEAR AND ORGANISERS.

I HEREBY ATTEST AND DECLARE:

- 1. THAT THE AFOREMENTIONED IS TRUE AND CORRECT AND I AM TO PROMPTLY SUBMIT SATISFACTORY PROOFS OF SAME INCLUDING MY AGE AND CITIZENSHIP.**
- 2. I HAVE NOT YET ATTAINED MY NINETEENTH (19TH) BIRTHDAY AND I SHALL NOT DO SO BEFORE AUGUST 31ST 2018.**
- 3. THAT I HAVE NOT ENTERED INTO ANY AGREEMENT THAT PROHIBITS ME FROM SUCCESSFULLY MAKING THIS APPLICATION.**
- 4. I HAVE READ AND AGREED TO THE TERMS AND CONDITIONS.**
- 5. ALL APPLICANTS MUST PRESENT A ANTIGUA & BARBUDA PASSPORT OR A BIRTH CERTIFICATE ALONG WITH A PICTURE ID**

I ALSO UNDERSTAND THAT THE ANTIGUA & BARBUDA FESTIVALS COMMISSION RESERVES THE RIGHT TO REFUSE MY APPLICATION AND THAT ANY FALSE OR MISREPRESENTATION I HAVE MADE IS SUFFICIENT GROUNDS FOR MY DISQUALIFICATION FROM THIS COMPETITION.

APPLICANT'S SIGNATURE

WITNESS

PARENT OR GUARDIAN'S SIGNATURE

WITNESS

I _____ PRINCIPAL OF _____
HEREBY STATE THAT THE EDUCATIONAL INSTRUCTION SCHOOL IS IN SUPPORT OF THE APPLICANT ENTERING AS A
CONTESTANT IN THE TEEN EXPLOSION COMPETITION.

PRINCIPAL'S SIGNATURE

WITNESS

.....**FOR OFFICIAL USE ONLY**.....

RECEIVED ON BEHALF OF ABFC: _____
SIGNATURE

DD / MO / YR
DATE

