For Official Use Only

Legal Name:			Contestant #	-
Stage Name:			Room #	-
Home Address:				
City:	State:	Zip:		
Social Media Links:				
f				
<u> </u>				
y				
Other:				
Accolades and Awards:				
Current or Previous Title(s):				
Why do you want to be Mis	s GayDays®? (100 words M	aximum)		
Who is a Drag Queen that i	nspires you and why? (100	words Maximum)		
If you were to win Miss Gay	/Days®, what would be yo	ur legacy? (100 wor	ds Maximum)	



ADDITIONAL PERSONNEL

Please note that all dancer(s), assistant(s), dresser(s), stylist(s), employee(s), and/or other helper(s) must be at least 18 years of age and possess a valid government issued ID (such as a driver's license or passport) issued in their own name which shall be presented at time of on-site registration as proof of age.

Legal Name:	Date of Birth:	
Role/Relationship:		
Legal Name	Date of Birth:	
Role/Relationship		
Legal Name:	Date of Birth:	
Role/Relationship:		
Legal Name	Date of Birth:	
Role/Relationship		
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Legal Name:	Date of Birth:	
Role/Relationship:		



By signing this application, I hereby attest that I have read and understand the Rules and Regulations for the Miss GayDays® Pageant, hereinafter referred to as the "pageant," and I agree to abide by and comply with all rules, regulations, restrictions, and conditions found therein.

I also agree to release and hold harmless Gay Days, Inc., the Avanti Palms Resort, the pageant sponsors, and all agents, volunteers, employees, representatives, and licensees from any liabilities and/or responsibilities associated with or arising out of my participation in the pageant and/or the receipt of the title of Miss GayDays®, including but not limited to personal injury, loss, and/or damage to personal property regardless of whether the personal injury, loss, and or damage occurred before, during or after the pageant or any GayDays® event or party.

I also hereby release myself from all rights pertaining to any recording (audio and/or video), and photography (still and/or motion) taken during or associated with any portion of the pageant, and any GayDays® event or party. I understand that Gay Days, Inc. will retain sole control and all rights to all recordings and photographs that I appear in or appear on. I understand and agree that Gay Days, Inc. will have the rights to use my name and the aforementioned recordings and photographs for publication, promotional purposes, advertising, and for any other purposes that they may choose.

Signature (Legal name)	Date
Print Name	