



MISS GAYDAYS® PAGEANT APPLICATION & INSTRUCTIONS

1. **Applications and entrance fees are due by 10:00PM SUNDAY, May 7th, 2017.** Applications received after the deadline **will not** be accepted.
2. Candidates must submit all of the following for the application to be considered complete:
 - a. A completed Miss GayDays® Pageant Official Application which will include:
 - i. Personal information (stage and legal name, age, date of birth, and contact information)
 - ii. Brief personal biography
 - iii. Community involvement, accolades, and awards
 - iv. Any Social Media links (Facebook, Twitter, Instagram, etc.)
 - v. Responses to two (2) questions
 - vi. Type of talent that will be performed
 - vii. List of additional personnel and their role or relationships (dancers, assistants, dressers, stylists, employees, significant others or other helpers)
 - viii. List of sponsors
 - ix. Three choices for “INSPIRATIONS of TIM BURTON.” NOTE: Choices are based on a first come, first serve: “*Alice in Wonderland*” both films **are not** available.
 - b. One (1) 8”x10” professional headshot photo in full hair and makeup
 - c. One (1) 5”x7” photo of contestant without hair and makeup
 - d. Non-refundable entrance fee of \$175.00 submitted online at www.GayDayS.com. Cash or checks will not be accepted for the entrance fee.
3. Applications must be submitted by email to Pageant@GayDayS.com in one single email.
 - a. Subject of email must include contestant stage name and Miss GayDays® Pageant Application
 - b. Body of email must include date payment was sent if paid by certified funds and the following attachments:
 - i. Application as one (1) multi-page PDF document
 - ii. Required photos as individual file
 - iii. Proof of on-line payment as one (1) single page PDF document
4. By signing and submitting an application, candidates attest that they have read, understand, and agree to abide by the Rules and Regulations of the Miss GayDays® Pageant.



OFFICIAL PAGEANT APPLICATION

Legal Name _____

Stage Name _____

Age _____ Date of Birth _____

Phone Number _____ Email _____

Address _____

City _____ State _____ Zip _____

For Official Use Only

Contestant # _____

Room # _____

Personal and Professional Biography: (100 words Maximum)

Why do you want to be Miss GayDays®? (100 words Maximum)

When representing Gay Days as Miss GayDays®, what will be your legacy? (100 words Maximum)

Community Involvement: _____

Accolades and Awards: _____

Talent: Lip Sync Dance Other _____ # additional performers _____



INSPIRATIONS OF TIM BURTON:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Additional Personnel: (Please use an additional page if needed)

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Social Media: _____

Sponsor(s): _____

Non-Profit: _____



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 DoubleTree by Hilton Orlando at SeaWorld, 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