



OFFICIAL COMPETITION APPLICATION

Legal Name _____

Stage Name _____

Age _____ Date of Birth _____

Height: _____ Weight: _____

Phone Number _____ Email _____

Address _____

City _____ State _____ Zip _____

Current Title(s): _____

For Official Use Only
Contestant # _____
Room # _____

When representing GayDays® as Mr. GayDays Leather, what will be your legacy goals? (100 words Maximum)

What is your favorite Fetish and Why? (100 words Maximum)

What is your favorite Piece of Leather and Why? (100 words Maximum)

Provide a brief description of Demonstration that you will consider for the competition? (100 words Maximum)

Club Affiliation: _____

Accolades and Awards: _____

Hobbies and Interests: _____

Volunteer Activities: _____

Additional Personnel:

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Legal Name _____ Age _____

Role/Relationship _____ Date of Birth _____

Sponsor(s): _____

Non-Profit: _____

By signing this application, I hereby attest that I have read and understand the Rules and Regulations for the Mr. GayDays® Leather competition and I agree to abide by and comply with all rules, regulations, restrictions, and conditions found therein. I declare that I am over 21 years of age (or will be by May 31st 2017) and am otherwise eligible to enter this competition. I further agree that if I am selected as the winner of Mr. GayDays® Leather 2017 I will participate as a contestant in the **International Mr. Leather (IML)** contest in Chicago - May 2018 and fulfill guidelines set forth for the event participation at IML.

I also agree to release and hold harmless GayDays®, Inc., the DoubleTree by Hilton Orlando at SeaWorld, the competition 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 competition and/or the receipt of the title of Mr. GayDays® Leather, 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 competition 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 competition, and any GayDays® event or party. I understand that GayDays®, 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 GayDays®, 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

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