



NO APPLICATION CONSIDERED
WITHOUT PHOTOGRAPH

MINOR'S APPLICATION

Date Entered: _____ Contract Date: _____ Nationality: _____

(Date you entered data in this form.)

Soc-Sec: _____

Name: First _____ Middle _____ Last _____

Goes by _____ Date of Birth _____ Age Range: _____

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Zip: _____

Home Phone _____ E-Mail _____

Parents: _____

Cell Phones _____ (Mother) _____ (Father)

Parent's Employment

Father _____ Work #: _____

Mother _____ Work#: _____

May we contact you at the office? Yes No

Boys Only

Height _____

Weight _____

Hair Color _____

Eye Color _____

Girls Only

Height _____

Weight _____

Hair Color _____

Eye Color _____

Sizes

Suit _____

Slacks: Waist _____ Length _____

Shirt Neck _____ Sleeve _____

Sport Shirt S _____ M _____ L _____ XL _____

Shoe _____ Hat _____ Glove _____

Sizes

Dress _____

Blouse _____

Skirt _____

Slacks _____

Coat _____ Shoe _____ Glove _____

Swim Suit _____

Sports/Skills _____

Musical Inst: _____

Foreign Lang: _____

Experience _____

Comments _____