TEXAS CONFERENCE OF CLUBS
MS. LONE STAR CONTEST
APPLICATION
(For Females Only)

NAME:_____ DATE OF BIRTH:_____

ADDRESS:_____

PHONE NUMBER:_____ E-MAIL:_____

APPLICATIONS WILL NOT BE ACCEPTED UNLESS COMPLETELY FILLED. ALL APPLICATIONS BECOME PROPERTY OF THE TEXAS CONFERENCE OF CLUBS.

Answer the following questions. If you need more room please use the back of this form

1. If you win the Ms. Lone Star title will you be able to fulfill the requirements and serve 1 year?

2. Why are you running for Ms. Lone Star?

3. What are your goals and interests?

4. How would you promote the GLBT community in a positive light?

5. How would you promote the Texas Conference of Clubs?

I affirm that all information on this application to be true and correct and I will abide by the rules of the Ms. Lone Star contest. Should I win the title I agree to carry out all the requirements of the title holder.

SIGNATURE: _____ DATE:_____