MISS REGAL INTE	<b>ERNATIONAL SOUTH AFRICA 2017</b>
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SECTION 1: PERSONAL INFORMATION	
TITLE SURNAME	
NAME(S) OF APPLICANT	
	AGE ON 1 JANUARY THIS YEAR
	PLACE OF BIRTH
HEIGHT IN CM	
PHYSICAL ADDRESS	0005
POSTAL ADDRESS	CODE
PROVINCE	
SECTION 2: EDUCATIONAL AND OCCUPATIONA	LINFORMATION
SCHOOL AT WHICH YOU MATRICULATED MATRICULA	
PLACE OF STUDY	
	YEAR OF STUDY e.g. 3rd year
FULL TIME PART TIME YEAR IN WHICH YOU	J WILL COMPLETE YOUR STUDIES
OCCUPATION	
EMPLOYER	
FULL TIME	PART TIME
SECTION 3: CONTACT INFORMATION	
FAX CELL NUMBER	
EMERGENCY CONTACT NUMBER AND NAME	
1. WHAT ARE YOUR HOBBIES AND SPECIAL INTERES	STS?
2. WHY DID YOU APPLY ENTER MISS REGAL SOUTH I	INTERNATIONAL AFRICA 2017?
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## T & C's:

- APPLICATIONS CLOSE FRIDAY JUNE 30TH, 2017
- APPLICANTS MUST BE UNMARRIED AND MUST NEVER HAVE BEEN MARRIED
- APPLICANTS MUST BE NATURALLY BORN WOMEN BETWEEN THE AGES OF 18 AND 27
- APPLICANTS MUST BE SOUTH AFRICAN CITIZENS, WITH A VALID PASSPORT OR AN APPLICATION FOR ONE
- APPLICANTS MUST SUBMIT A COPY OF THEIR GREEN BARCODED ID BOOK OR SMART ID OR BIRTH CERTIFICATE
  WITH THEIR APPLICATION
- APPLICANTS MUST SUBMIT TWO (2) PHOTOGRAPHS WITH THEIR APPLICATIONS, ONE COLOUR FULL-LENGTH
   AND ONE COLOUR HEAD AND SHOULDERS
- APPLICATIONS MAY BE EMAILED TO WAYNE@FIRSTCREWPRODUCTION.CO.ZA
- HARD COPIES OF PHOTOGRAPHS CAN BE HANDED IN AT BELLANITA EMPORIUM IN MICHELANGELO TOWERS
   MALL, SHOP L10 ON LOWER LEVEL NEXT TO KNEAD BAKERY
- AN ADMINISTRATION FEE OF R400.00 (WHICH INCLUDES YOUR ENTRY INTO THE NATIONAL WORKSHOP WHICH TAKES PLACE ON JUNE 2RD, 2017 VENUE TO BE CONFIRMED) IS PAYABLE VIA EFT OR CASH, MUST ACCOMPANY APPLICATION FORM
- ALL FINALISTS WILL BE REQUIRED TO PARTICIPATE IN A LIMITED NUMBER OF EVENTS AND ENGAGEMENTS
   DURING JULY TO SEPTEMBER 2017
- THE MISS REGAL INTERNATIONAL SOUTH AFRICA ORGANISATION PROUDLY SUPPORTS POWA (PEOPLE OPPOSING WOMEN ABUSE) AND SEMI-FINALISTS AND FINALISTS WILL BE REQUIRED TO RAISE FUNDS / GOODS FOR THEIR RELEVANT SHELTERS
- JUDGES' DECISION IS FINAL AND NO CORRESPONDENCE WILL BE ENTERED INTO
- SUBMISSION OF THIS FORM CONSTITUTES ACCEPTANCE OF THE ABOVE TERMS AND CONDITIONS
- PRIZES ARE NOT TRANSFERRABLE FOR CASH

APPLICANT SIGNATUR	E:	DATE:	
BANKING DETAILS:			
CAPITEC BANK			
ACCOUNT NUMBER:	1376655827		
BRANCH NAME	470010		
ACCOUNT NAME:	W STAFFORD (MISS REGAL)		
REFERENCE:	YOUR NAME AND SURNAME		