



**League of United Latin American Citizens**  
LULAC Council #10, P.O. BOX 4616, Davenport, IA 52808-4616

APPLICATION FOR LULAC FIESTA QUEEN

Date \_\_\_\_\_

Last Name \_\_\_\_\_ Middle Initial \_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Birth date \_\_\_\_\_ School currently attended \_\_\_\_\_

Last Grade completed \_\_\_\_\_ Overall GPA \_\_\_\_\_

Parent or Legal Guardian Information

Father's Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Mother's Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

.....  
Please list any activities, hobbies, and volunteer work. Personal interests, certificates and or any special skills that may qualify you for the candidacy, use back if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that all statements in this application are true. I understand that if any of the above statements are untrue, this application may be rejected and may cause any prizes to be rescinded, I hereby authorize LULAC to contact any of the institutions to verify school and reference records.

Furthermore, understand that with the Queen pageant I will be required to obey and follow all rules and regulations of the pageant, failure to do so will result in dismissal.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

If under the age of 18 Parents Signature \_\_\_\_\_ Date \_\_\_\_\_