

GRAND EXALTED RULER
Hon. Dr. Donald P. Wilson

**GRAND LODGE
BEAUTY AND TALENT DEPARTMENT**

GRAND COMMISSIONER
PGER Carlton L. Coleman

GRAND DAUGHTER RULER
Hon. Margaret D. Scott



GRAND DIRECTRESS
PGDR L'Dina Robinson

Carlton L. Coleman
Grand Commissioner of Beauty and Talent
I.B.P.O.E. Of The World
1813 Stencil Drive
Rocky Mount, NC 27801

OFFICIAL APPLICATION

Name: _____ Birth Date: _____ Sign: _____

Name of Both Parents: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ Grade in School: _____

School Attending: _____ Scholastic Average: _____

Class Honors Received: _____

School related Activities: Arts, Music, Drama, Speech: (yrs. Of participation, offices held: _____

Sports: _____

Community Service Activities: _____

Hobbies and Talents: _____

Name and Address of Local Newspaper: _____

Talent: _____

We certify to the best of our knowledge the above information is true and hereby release the ELKS GRAND LODGE from any and all claims for damages or for injuries which may be sustained while participating in any of the I.B.P.O.E. of W. Beauty and Talent Programs.

Sponsor's Signatures

State President

State Auxiliary President

State Association Director

State Association Directress

Lodge Exalted Ruler

Signature of Contestant

Deadline date:

Enclosed 8x10 glossy black and white photo, birth certificate, and non - refundable sponsoring fee.
The Grand Commissioner must receive application no later than 07/15/20_____.

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Consent and Release Form

I, _____ grant permission,
in case of illness or accident, to have _____

Referred to a physician and/or hospital for emergency treatment.

(Parent will be informed at once). The enclosed can be used to contact me. I also release the Grand Lodge of the Improved Benevolent and Protective Order of Elks of the World Inc. or any of it's auxiliaries from any responsibility and liability in case of illness or accident. I further understand and accept that the Grand Lodge of the Improved Benevolent and Protective Order of Elks of the World Inc. or any of it's auxiliaries may cancel at any point or deny the participation of said applicant that is not in the best interest of the above organization.

Signature of Applicant or Parent of Minor

Print Name

Street Address

Town, State and Zip Code

Area Code and Telephone Number