MISTER AND MISS CAVITE ORGANIZATION (MMCO)
misterandmisscavite.com • mistermisscaviteclients@gmail.com • 0995 414 3637

Official Application Form

Mister & Miss Cavite Teens 2026

Please print clearly in ink. Attach one (1) recent 2x2 photo and one (1) half-body photo. Submit the completed form together with the signed Parent/Guardian Consent Form (if under 18) and Data Privacy Agreement.

APPLICANT INFORMATION

Full Name: _____

Age: _____ **Birthdate:** _____

Gender (Mister / Miss): _____ **Municipality:** _____

Complete Address: _____

Email Address: _____ **Contact Number:** _____

PLATFORM / ADVOCACY

In a few sentences, describe the cause you would champion as a delegate.

_____

_____

_____

_____

PARENT / GUARDIAN INFORMATION (REQUIRED IF APPLICANT IS UNDER 18)

Parent / Guardian Full Name: _____

Relationship to Applicant: _____ **Contact Number:** _____

EMERGENCY CONTACT (IF DIFFERENT FROM ABOVE)

Name: _____

Relationship: _____ **Contact Number:** _____

DECLARATION

I certify that the information provided in this application is true and accurate to the best of my knowledge, and I understand that any false statement may result in my disqualification from Mister & Miss Cavite Teens 2026.

_____

Signature over Printed Name — Applicant

Date: _____

Signature over Printed Name — Parent / Guardian (if applicant is a minor)

Date: _____

For office use only: Received by _____ Date _____ Status _____