

**CHAPERONE OR DIRECTOR 2017**

**Individual Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Country | Click or tap here to enter text. | | **PHOTO** | |
|  |  | |
| Full Name | Click or tap here to enter text. | |
|  |  | |
| Age | Click or tap here to enter text. | |
|  |  | |
| Date of Birth | Click or tap here to enter text. | |
|  |  | |
| Address: | Click or tap here to enter text. | | | |
|  |  | | | |
| Text/WhatsApp  /Skype/00V00: | Click or tap here to enter text. | | | |
|  |  | | | |
| Passport ID: | Click or tap here to enter text. | | | |
|  |  | | | |
| Email Address | Click or tap here to enter text. | | | |
|  |  | | | |
| Facebook | Click or tap here to enter text. | | | |
|  |  | | | |
| Can you communicate in Sign Language? | | Yes | | No |
|  | |  | |  |
| Which communication language? | |  | | |

Your experience in the field of Pageant/Work/Training (s):

|  |
| --- |
| Click or tap here to enter text. |

**Information for Chaperone or Director**

|  |  |  |  |
| --- | --- | --- | --- |
| T-shirt size | Click or tap here to enter text. |  |  |

Entrant certifies that the above information is correct and meets the eligibility requirements of MMDI events. By signing this application, the entrant agrees to give MMDI full rights to use all images related to MMDI.

Entrant also agrees to accept the final decision of the MMDI Judges.

**Important note:**

Please email this application form, a copy of your passport & proof of **600 Euro** for Hotel with hearty breakfast only for seven (7) nights from July 10 to July 16, 2017 to the Representative by May 30th, 2017.

Please check our website and click on PayPal for your payment of **600 Euro** or make an arrangement to pay to your coordinator.

If passed after May 30th, late fee will be applied at **1200 Euro.**

After this application, MMDI coordinator will send you a confirmation. If you need more information, please do not hesitate to contact us with any questions, you may have.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: [MMDI2017@gmail.com](mailto:MMDI2017@gmail.com) / Your coordinator (each own email address above)

Skype: mmdi2017/your coordinator’s Skype

http://missmisterdeafinternational.org/