

\_\_\_ AG \_\_\_ BB

# American Girl Fashion Show Model Call Model Registration Form

\_\_\_ SAT. \_\_\_ SUN.

**Model's Name:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Email Address:\*** \_\_\_\_\_

*\*Please provide an e-mail address if available; we will be doing the majority of our communication via e-mail.*

**Age by April 1st** \_\_\_\_\_

**Grade** \_\_\_\_\_

**Dress Size** \_\_\_\_\_

**Eye Color** \_\_\_\_\_

**Hair Color** \_\_\_\_\_

## MEASUREMENTS:

**Bust:** \_\_\_\_\_

**Waist:** \_\_\_\_\_

**Hips:** \_\_\_\_\_

**Height:** \_\_\_\_\_

*AGFS STAFF USE*

Which doll does applicant most resemble?

- |  |                                   |   |
|--|-----------------------------------|---|
| <input type="checkbox"/> Kit or Ruthie         | <input type="checkbox"/> Kaya     | <input type="checkbox"/> Molly or Emily |
| <input type="checkbox"/> Elizabeth or Felicity | <input type="checkbox"/> Josefina | <input type="checkbox"/> Rebecca        |
| <input type="checkbox"/> Julie or Ivy          | <input type="checkbox"/> Kirsten  | <input type="checkbox"/> Addy           |
| <input type="checkbox"/> Doll of the Year:     | _____                             |   |