

Registration Fee: \$10



Little and Tiny Miss Roma

Name:

Phone:

**School/
Grade**

Age:

Level:

What is your full name, age, and where are you from?

What do you want to be when you grow up?

What is your favorite color?

What is your favorite subject at school?

What is your favorite food?

Who is someone you love and why?

If you had a magic wand, what would you do?

What is your favorite book, movie, or TV show?

Are you involved in any extracurricular activities? If not please answer this other question. What is your favorite song to sing or dance to?

Is there anything else you'd like the judges/audience to know about you, that wasn't covered in the questions?

Please return this form to the Roma City Hall front desk.