Please attach Headshot photo



Beautillion Application 2024 (Please Type or Print)

Date:			
Name:			
Address:	City:	State:	ZIP:
Home Phone#:		Cell#:	
Email:		_	
High School:		_ Classification:	
Parent(s)/Guardian:			
Cell (Parent) #:		Email (Parent):	
Emergency Contact:		-	
		ich you participate:	
What are your plans after h	nigh school?		
		nt on the following page w	ith your personal goals and
Can you attend a KBI meet	ting twice a month?		
I,(Beau if 18 or Paren	, autho nt/Guardian)	rize the Kappa Beautillion	Inc. to publish photographs
in the souvenir booklet, KE	I Facebook page and oth	ner media outlets.	
		<over></over>	

Any questions contact: Elbert Pringle (epringlekbicolumbiascalumni@gmail.com)

Kappa Beautillion Inc. 501 C3 Educational Org. Post Office Box 7522 Columbia, SC 29202

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Personal Statement