 

Bella Debutante Registration Form

**Check The Box next to the date of your selected Ball (make sure you only select 1 date):**

May 2025 July 2025 August 2025 Sept 2025

[ ]  - Friday 30th May [ ]  - Friday 25th July [ ]  - Friday 29th Aug [ ]  - Friday 12th Sept

[ ]  - Saturday 31st May [ ]  - Saturday 26th July [ ]  - Saturday 29th Aug [ ]  - Saturday 13th Sept

**Are You the Debutante or partner (Check the correct box)?**

[ ]  - Debutante [ ]  - Partner Type your partners or debutantes name here.

**What is your name?** Type your name here.

**What is your phone number?** Type your phone number here.

**What is your email address number?** Type your email address here.

**What is your parent / guardian’s name?** Type Parent / Guardian name here.

**What is your parent / guardian’s phone number?** Type phone number here

**What is your parent / guardian’s email address?** Type parent / Guardian email address here

[ ]  **I accept Bella Events / Bella Debutante terms & conditions (refer to website for details:** [www.belladebutante.com.au](http://www.belladebutante.com.au)

**Are you prepared to volunteer for any of the below roles on the night of the Ball? Please tick any that you are comfortable doing.**

[ ]  **Speeches** [ ]  **Gift Presentation** [ ]  **Cutting the cake**

 

Bella Debutante Profile Form

**What is your name?** Type your name here for the M.C. on the night

**Your age (at the time of the Debutante Ball):** Type your age here.

**What School do you attend? Or what is your occupation?**

Type your school or occupation here.

**What year will you be in at the time of the Debutante Ball?** Type your year level here.

**Tell us a bit about you for your introduction by the M.C. on the night, Hobbies / pass times?**

Click or tap here to enter text.

**Tell us a bit about your future aspirations for your introduction by the M.C. on the night?**

Click or tap here to enter text.

 

Bella Debutante Photo Permission Forms

**What is your parents / guardian’s name (if you are under 18)?**

Type Parent / Guardian name here.

**I give authority for my photo/ child’s photo, to appear on all social media platforms and any future advertising for Bella Debutante/ Bella Events.**

[ ]  YES

[ ]  NO

**I am aware that photos will be used in good judgment and that I have the right to revoke permission to use these photos. The revocation does not apply to photos that have already been produced and released.**

\*YOU WILL ONLY NEED A PARENTS AUTHORITY IF YOU ARE UNDER THE AGE OF 18.

\*OVER 18 THE DEBUTANTE AND/OR PARTNER ARE TO GIVE AUTHORITY.

***Please send your completed form back to Bella, do a save as on this document and email it as an attachment to:*** ***belladebutante@bigpond.com*** ***Please put your name in the “subject” line of the email. Thank you for your support in producing a memorable event.***