

APPLICATION FOR COLONIAL BALL PRESENTATION

Full Name of Debutante:

Name Called:

Address:

Debutante C.A.R. or D.A.R. Number(s) and Chapter (if applicable):

Parents Full Name, Address, & Telephone Number:

Parents S.A.R./D.A.R. Number(s) and Chapter(s):

Grandparents Full Name and Address:

Grandparents S.A.R./D.A.R. Number(s) and Chapter(s) (if applicable):

Birth Date of Debutante:

Schools attended or presently attending:

Present Grade Level:

Name & Unit of Revolutionary Ancestor (only one needed):

Full Name and Relationship of Gentleman Who Will Present Debutante:

Full Name of Escort and Address:

Name, Address, & Telephone Number of Person Submitting This Information:

Please submit non-refundable \$50.00 application fee along with a recent snapshot to:
Greg Ohanesian, Colonial Ball Chairman, Post Office Box 1373, Bennettsville, S.C.
29512-1373.

I certify that the information above is true except as to the names of Presentor and
Escort, which may change.

Debutante, Parent, Grandparent, or
Responsible Adult Submitting this
Information on Behalf of Debutante