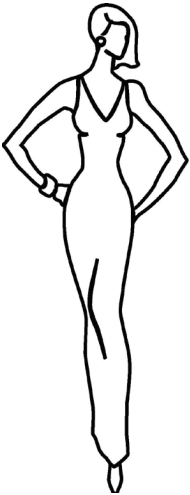


To be considered for participation return this form no later than January 9, 2008



Background Information:

1. Model Name: _____
 Spouse's Name: _____
 Parent/Guardian (if applicable): _____
2. Home Address: _____
 City: _____ State: _____ Zip: _____
3. Email: _____
4. Home Phone: _____ Work Phone: _____
 Cell Phone: _____ Fax: _____
 Best Number & Time of Day to Reach You: _____
5. Have you previously modeled for CBD? _____
 If Yes, last year participated: _____ Total Years: _____
6. Age: _____ Birthplace: _____
7. What type of cancer did you have? _____ Date of Diagnosis: _____
8. Name of practitioners in Gainesville who provided care: _____

9. What has been your ACS involvement? (support groups, committee volunteer, programs):

Friday,
 April 18, 2008
 11:30 am
 Silent Auction
 12:00 pm
 Lunch
 12:15 pm
 Fashion Show
 UF Hilton &
 Conference Center

Size Information

Shoe Size: _____ Height: _____ Weight: _____
 Clothing you prefer not to wear: _____
 Physical restrictions? _____

WOMEN ONLY Shirt Size (circle): S M L XL
 Bust: _____ Pant: _____ Dress: _____

MEN ONLY Shirt Size (circle): S M L XL XXL
 Dress Shirt (neck & sleeve length) _____
 Jacket Size: _____ (circle) Short Regular Long
 Pant Size (waist & length) _____

CHILDREN ONLY Shirt Size: _____ Pant Size: _____ Dress Size: _____

Models confirmed for participation in the Fashion Show will be notified by phone AND mail. If you do not receive verbal or written confirmation by February 15th, 2008, we will hold onto your application should our needs change prior to day of show.