

CONTESTANT BIO

Contestant #: _____

Name: _____

Nickname (if one): _____

Age: _____

Height: _____

Measurements: _____, _____, _____,

Hair Color: _____

Eye Color: _____

Occupation: _____

Married? Yes No

If you have kids, how many? _____

Best feature: _____

Hobbies: _____

Favorite movie: _____

Favorite actor/actress: _____

Favorite food: _____

Favorite drink: _____

Favorite song: _____

Favorite vacation spot: _____

Who would you like to meet and why? _____
