



Miss Troy University

2025 - 2026 TALENT & FITNESS FORM

Name of Candidate:

Email:

Address:

City:

State:

Zip:

School:

Grade:

Hometown:

Home Telephone:

Cell:

Age as of the date of this preliminary:

Date of birth:

Type of talent (vocal, dance, piano, etc.):

Name of selection:

Type of microphone preferred (if available): ☐ Cordless ☐ Mic with Stand ☐ Lavalier

Will you be using props? ☐ Yes ☐ No If yes, please describe:

Please write a short 2-3 sentence introduction for your talent presentation:

Please write a short 2-3 sentence response about how you stay healthy and fit: