

WonderCon@Home Masquerade Contestant Entry Form

*All personal information you supply on this form will be held confidential and not shared with anyone.
You must be at least age 18 to participate in photos or video in this Internet-based event.*

CONTESTANT NAME (or representative of group) _____

COSTUME TITLE _____

Street Address _____

City _____ State _____ Zip code _____

Country _____ Phone number _____

E-mail _____ Today's date _____

Have you participated in a San Diego Comic-Con or WonderCon Masquerade before? Yes ___ No ___

Comic-Con Member ID (If you have one) _____

Tumblr name you will be using for this event _____

Original Design ___ or Re-Creation ___ If re-creation, list source _____

If a group entry, list number appearing in group _____

If a group, list first and last names of other members _____

*To request a contestant spot, complete this form and e-mail it (and any photos), or
supply all of this information in the text of an email no later than March 17, 2021 to:*

Masqueradeathome@comic-con.org