

Nan̓isuyaat̓ Onaa NanaKar̓
BEAUTIFUL BABY CONTEST 2026
Pre- REGISTRATION FORM

DATE: Wednesday, September 30, 2026

LOCATION: Comanche Nation Dance Grounds

REGISTRATION: Begins at 5:00 - 5:45 PM

JUDGING: Begins at 6:00 PM

CONTESTANT INFORMATION

Child's Full Name: _____

Date of Birth: _____ Age on Contest Date: _____ Gender: ☐ Boy ☐ Girl

Tribal Affiliation: _____

Age Category: ☐ 0-11 months ☐ 12-23 months ☐ 24-35 months ☐ 36-48 months

PARENT / GUARDIAN INFORMATION

Parent/Guardian Name: _____

Phone: _____ Email Address: _____

Mailing Address: _____

CONTESTANT T-SHIRT T-Shirt Size: ☐ 2T ☐ 3T ☐ 4T ☐ 5T ☐ Youth XS

PARENT / GUARDIAN ACKNOWLEDGMENT

I certify that the information provided on this registration form is accurate. I give permission for my child to participate in the 2026 Beautiful Baby Contest and understand that contestants will be judged within the applicable contest category.

____ I consent to my child being photographed ____ I do not consent to my child being photographed

Parent/Guardian Signature: _____ Date: _____

Registration #	T-Shirt Issued	Staff Initials

Questions? Contact Onaa Kahni Center • 580-360-5017

Please email the completed pre-registration form to
onaakahni@comanchenation.com by September 25, 2026.

Day-of-event registration will also be available.