

Miss Elizabeth Community Fair Queen Pageant Official Entry Form

CONTESTANT'S NAME _____

HOMETOWN _____ HEIGHT _____ HAIR COLOR _____

HIGH SCHOOL & GRADUATION DATE _____

SPONSOR NAME _____

COLLEGE & CAREER PLANS _____

EMPLOYMENT _____

HOBBIES & INTERESTS _____

COMMUNITY ACTIVITIES _____

SPECIAL HONORS _____

Miss Elizabeth Community Fair Queen Pageant Official Entry Form Page 2

CONTESTANT NAME _____

BIRTHDATE _____ SOCIAL SECURITY # _____

HOME MAILING ADDRESS _____

CITY _____ ZIP CODE _____

HOME TELEPHONE # _____ CELL _____

E-MAIL ADDRESS _____

NAMES OF CONTESTANT'S PARENTS AS TO APPEAR IN PAGEANT PROGRAM

By signing this application I acknowledge that permission is given to The Elizabeth Community Fair Queen Pageant and The Elizabeth Community Fair to use my image, likeness and information when needed. I also acknowledge that I agree in whole with the pageants guidelines and rules and the decision of the judges is final.

Contestant _____

Parent _____

Date _____