

*Miss Teen Independence County
Beauty Pageant
2017*



Ages 13-16

"Sharing and Building Dreams, Friendships and Memories"

*Please read the attached rules and regulations as this is a new division.
Rules have changed and new regulations will be enforced.*

Thank You!



Miss Teen Independence County

****ALL INFORMATION FOR THIS APPLICATION MUST BE TYPED****
****Complete sentences should be used on this application to best benefit the contestant. ****
****This is the official document that must be submitted at registration. No attachments/substitutions****

Full Name _____ Age _____ Date of Birth ____/____/_____
Home Address _____ Telephone Number _____
Parent/Guardian Names _____

Educational Information:

School Attending _____ Current Grade _____

Contestant Information:

List the honors you have achieved in School. _____

List two (2) greatest achievements at this point, in your life.
❖ _____

List three (3) interesting facts about yourself.
❖ _____

What are some of your hobbies and interests? _____

List your club memberships, school activities and community involvement. _____

Why do you wish to become Miss Teen Independence County, what will you do to promote your title, and how will you maintain the respect of your title? _____

What is your ambition for the future and why? _____

The information provided above will be used by the judges during your private interview. Please give special thought to the information provided. Factual information that may be derived into questions will benefit the contestant. Statements that reflect your personality will be helpful and will make the show more fun for you, the judges and the audience. All information must be on this official Entry form. NO OTHER FORMS OR ATTACHMENTS ARE ALLOWED. A complete list of rules are attached and are available online at www.icfair.com.

****MANDATORY**** There will be a contestant meeting and rehearsal at 6:00 p.m. July 13. This is a mandatory meeting.

****All applicants must be a current resident of Independence County. Please see rules concerning legal residents.**

Contestant Signature _____

If you have any Questions or Concerns, please call Ms. Pam 612-4446 or Ms. Debbie 307-2859

\$25.00 Entry Fee Required
Send Application to:
Independence County Fair
Beauty Pageant Registration
P.O. Box 2641
Batesville, AR. 72503

NO REFUNDS WILL BE GIVEN ON ENTRY FEES. A \$30 fee will be charged on all returned checks.

DEADLINE: NO application will be accepted after July 11. All applications will be denied and returned with entry fee.

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