

MISS CLARKE COUNTY FAIR PAGEANT CONTESTANT APPLICATION

Name _____ Age _____

Address _____ Phone (h) _____

Birth Date _____ Cell _____

Email _____

Parents Names _____

Education: High School _____ Grade Level _____ Year Grad _____

College _____ Grade Level _____ Year Grad _____

Height _____ Eye Color _____ Hair Color _____

List hobbies, clubs, school activities, church activities, contests won, accomplishments, community service, etc.

Current Employment _____

Platform Topic _____

When filling out this application, keep in mind that some of this information will be used to introduce you to the audience.

I, _____, understand the rules and duties listed above and I meet the requirement to compete in the 2010 Miss Clarke County Fair Pageant.

Signature of Contestant _____

Date _____

Deadline to Enter: July 18, 2010

Contact #: 540-837-1148 / cell 540-539-3839

Mail Application along with headshot picture to be printed in local newspaper and published in Pageant program to:

Doris Brennen
383 Shenandoah River Lane
Front Royal, VA 22630