

ENTRY FORM

Please read form carefully before filling it out. Type or print in ink

Girl ____ Boy ____ Age Division: _____

Contestants Name: _____

Address: _____ City: _____

State: ____ Zip: ____ Phone: () _____ Cell: () _____

Child/Spouse of: _____

Birthdate: _____ Age _____ Hair _____ Eyes _____

School/Daycare _____

Favorite Color _____ Food _____ Movie _____

Special Interest/Hobby: _____

Clubs/Organizations: _____

Ambition for the Future: _____

The information provided above will be read while the contestant is on stage. Please give special thought to the information provided. Statements that reflect your personality will be helpful and make the show more fun for you, the judges, and the audience.

PAGEANT ENTRY FORM (cont.) NAME: _____

AGE DIVISION: _____

Mark all events you entered \$ for:

Mail entries on or before August 11th, 2018

Beauty is mandatory \$ 40.00 _____

1. Photogenic (bring picture to pageant to be judged)\$ 5.00 _____

2. Most Beautiful/Handsome (judged on stage)\$ 5.00 _____

3. Best Fashion (judged on stage) \$ 5.00 _____

4. Best Personality (judged on stage)\$ 5.00 _____

5. Best Model (judged on stage)\$ 5.00 _____

6. Prettiest Smile (judged on stage)\$ 5.00 _____

7. Prettiest Eyes (judged on stage)\$ 5.00 _____

8. Prettiest Hair (judged on stage)\$ 5.00 _____

or ALL 8 for..... \$30.00 _____

9. Optional Supreme title- \$10.00

Total Entry fee paid. \$

TOTAL=

***Make checks payable to: Conway County Fair Association* (Or send cash) or money order
Applications will not be picked up. They must be mailed.**

MAIL to DIRECTOR: Amy Davis * 139 Ault Rd *Adona, AR 72001

PHONE #: [501-208-3034](tel:501-208-3034)

E-MAIL: amyddavis@att.net

**APPLICATIONS ARE TO BE TURNED IN AND POSTMARKED 2 WEEKS BEFORE THE PAGEANT DATE
NO EXCEPTIONS.**