

# Kiwanis Covington County Fair

## 2017 Pageant Entry Form

Entry Fee: \$10.00 per contestant

Optional Categories: \$5 each or \$15 for all 4 optional categories

**Deadline for Entry: October 13, 2017 (or first 25 entries)**

**MONDAY, OCTOBER 16<sup>TH</sup> @ 6:30PM**

Please check one division:

Tiny Miss (4 – 6 years old)     Little Miss (7 – 9 years old)     Miss Preteen (10 – 12 years old)

**DRESS REQUIREMENTS: Heirloom dresses for Tiny Miss; Long Pageant dresses for Little Miss & Miss Preteen**

### OPTIONAL CATEGORIES:

Prettiest Eyes     Prettiest Hair     Prettiest Smile     Prettiest Dress

Contestant Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Parent(s)/Guardian(s): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

School Organizations/Clubs: \_\_\_\_\_

Hobbies / Interests: \_\_\_\_\_

Goals / Ambitions: \_\_\_\_\_

Favorites:

- Fair Food \_\_\_\_\_
- Fair Ride \_\_\_\_\_
- Fair Event \_\_\_\_\_

**EVENT DISCLAIMER:** Please review the following waiver and disclaimer. **By adding your signature, you accept this waiver and disclaimer.** Waiver and Release: By participating in this Event, I do so at my own risk. I assume all risk of injury, illness, damage or loss to me or my property that might result, including without limitation, any loss or theft of personal property. I consent to medical treatment in the event of an injury, accident and/or illness during the Event. I agree on behalf of myself (and my personal representatives, heirs, executors, administrators, agents, and assigns) to release and discharge the organizers of this event, its principals, its officers & directors, its employees, all sponsors and their representatives and employees from and all claims or causes of action (known or unknown) arising out of their negligence. I acknowledge that I have carefully read this 'Waiver and Release' and fully understand that it is a release of liability. By my signature below, I am waiving many right that I may have to bring legal action to assert a claim against any and all Event sponsors for their negligence.

*I hereby grant full permission to any and all of the foregoing to use my name, picture, and likeness in any broadcast, telecast, video or print media reporting or advertising of the Event without compensation.*

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**MAIL TO: Kaci Perry, 205 Spruce Drive, Andalusia, Alabama 36421**

**MAKE CHECK PAYABLE TO: KCCF**

**\*\*\*NEW\*\*\* VIEWERS CHOICE AWARD for each division. \$1.00 per Vote.**

Viewer's Choice votes will be accepted from 5:30pm – 6:30pm the night of the pageant.