

Pic: _____ Photogenic _____

NO: _____

PAID: _____ CHECK # _____ / CASH DATE: _____ BY: _____ B.C. _____

MISS HARDIN COUNTY FAIR

Please print or type clearly and return as soon as possible to Linda Thomas 234-9578, mail to 3366 St. John Rd. Elizabethtown, KY 42701 or email to lmthomas60@windstream.net

NAME: _____

BIRTHDAY: _____ AGE _____

PARENT(S) NAME: _____

Address: _____

Home Phone _____ Additional #: _____ Email address: _____

Name/Phone # of Sponsor _____

School attending: _____ grade: _____

School activities/Clubs/Awards _____

Community Activities: (church groups, etc) _____

Future Plans (college/career) _____

Hobbies/Talents: _____

I certify that the above information is correct and I meet all the qualifications and understand the rules of the Miss Hardin County Fair Pageant!

Must have a copy of your birth certificate for age verification due to this pageant advancing on to the state level.

Contestant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

If under 18.