## Miss Hardin County Fair

# REGISTRATION FORM

| (Please Print) | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Contestant & Contact Information | | | | | | | | |
| Contestant’s First Name: | | | Middle: |  | | Last Name: | | |
|  | | | | | |
| Street address: | | | | | Date of Birth.: | | | Home Phone: |
|  | | | | | / / | | | ( ) |
| P.O. box: *If Applicable* | | City: | | | | State: | ZIP Code: | |
|  | |  | | | |  |  | |
| Email Address: | | Parent Cell Phone: | | | | Contestant Cell Phone | | |
|  | | ( ) | | | | ( ) | | |
|  | | | | | | | | |
| Age: | School Attending: | | | | | | | |
| Parent’s Name: | | | | | | | | |

| School & ExtraCurricular Activities |
| --- |
| School Activities/Clubs: | |
| Community Involvement: |
| Hobbies,Talents & Awards: |
| Future Plans (college, career, etc.) |
| SPONSORS NAME: |
| By signing this registration form, you have read & agree to comply with the Miss HC Pageant Rules & Regulations and grant the Hardin County Fair and Horse Shows permission to use your photo for promotional purposes only.  Contestant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |