JUDGES WILL SEE APPLICATIONS

Contestant Number_____
(Committee use only; do not fill in)

ANDERSON COUNTY FAIR PAGEANT

JUNIOR FAIREST OF THE FAIR

Name: _____Preferred Name: _____
Last First Middle

Date of Birth: _____Age: _____ Phone: _____

Address: _____

City: _____ County: _____ Zip: _____

Father/Guardian's Name: _____ Current City: _____

Mother/Guardian's Name: _____ Current City: _____

Step-Father's Name: _____ Current City: _____

Step-Mother's Name: _____ Current City: _____

School: _____ Grade (in the fall): _____
(Elementary or Middle School attending in the Fall)

ALL INFORMATION WILL BE READ ALOUD ON STAGE AS CONTESTANT MODELS

Please list (hobbies, activities, achievements, ect.) about the contestant.
Please list no more than three; additional facts will be excluded from the program.

Top 3 Activities:
1. _____

2. _____

3._____

Top 3 Achievements:
1._____

2._____

3._____

_____ _____
Signature of Parent Date

Email Address: _____