

**Queen Pageant
Registration and Contact Information**

Full Name: _____

Address: _____ City _____ Zip _____

Phone # _____ Alternate # _____

Email: _____ Last 4 Digits of Social: _____

Date of Birth: _____ Age: _____ Height: _____

Parent's Name: _____

Parent's email: _____

* Who should be called in case of an emergency?

Name: _____ Relationship: _____

Address: _____ City: _____

Phone # _____ Alternate # _____

Known Medications Contestant is taking or Known Allergies: _____

I have read and understand the rules and regulations of the Miss Sangamon County Fair Queen Pageant. I agree to abide by them as a contestant of this pageant and will adhere to these guidelines should I be named Miss Sangamon County Fair 2019.

Contestant Signature: _____ Date: _____

* A Parent/Guardian Signature is required for all contestants, regardless of their age.

Parent/Guardian Signature:

_____ Date: _____

Fee: \$50.00 - Cash or Check, Payable to Sangamon County Fair