

JUNIOR MISS MARSHALL COUNTY 2017 **Presented by the Marshall County Chamber of Commerce** Saturday, February 4, 2017 at 7:00 PM Marshall County Community Theatre on the Lewisburg Square Open to Ages 13-15 DEADLINE: Friday. January 20. 2017

NAME: _____

AGE: DOB: Email:

ADDRESS: _____

TELEPHONE NUMBER: Alternate number where a message may be left: _____

WHAT SCHOOL DO YOU ATTEND? WHAT GRADE ARE YOU CURRENTLY IN?

WHAT EXTRA CURRICULAR ACTIVITIES DO YOU PARTICIPATE IN?

WHAT ARE A FEW OF YOUR HOBBIES?

WHAT THREE WORDS DESCRIBES YOU BEST:

PARENTS FILL OUT: *I am allowing my child, ______, to participate in the 2017 Junior Miss Pageant.*

PARENT SIGNATURE:

Applicant must attend Marshall County Schools or be home schooled in Marshall County. At least one parent must reside in Marshall County. There will be a casual wear and formal wear competition. Sponsorship fee is \$60.00. Any Business or parent may sponsor a contestant (Split sponsorships welcome, limit two) Mail application or drop off at: (For after-hours use night drop) Marshall County Chamber of Commerce 227 2nd Avenue North, Lewisburg, TN 37091 (Phone) 931-359-3863 ***PICTURE DATE WILL BE ANNOUNCED** NAME OF SPONSOR(S):______



PRE-TEEN JUNIOR MISS MARSHALL COUNTY 2017 Presented by the Marshall County Chamber of Commerce Saturday, February 4, 2017 at 6:00 PM Marshall County Community Theatre on the Lewisburg Square Open to Ages 10-12 DEADLINE: Friday, January 20, 2017

NAME: ______

AGE: _____DOB: ______Email: _____

ADDRESS: ______

TELEPHONE NUMBER: Alternate number where a message may be left: _____

PARENTS NAME: ______

WHAT SCHOOL DO YOU ATTEND? WHAT GRADE ARE YOU CURRENTLY IN?

WHAT EXTRA CURRICULAR ACTIVITIES DO YOU PARTICIPATE IN?

WHAT ARE A FEW OF YOUR HOBBIES?

WHAT THREE WORDS DESCRIBES YOU BEST?

PARENTS FILL OUT: I am allowing my child, ______, to participate in the 2017 Pre-Teen Junior Miss Pageant.

PARENT SIGNATURE: _____

Applicant must attend Marshall County Schools or be home schooled in Marshall *County.* At least one parent must reside in Marshall County. There will be a casual wear AND evening gown competition. Sponsorship fee is \$50.00. Any Business or parent may sponsor a contestant (Split sponsorships welcome, limit two)

Mail application or drop off at: (For after-hours use night drop) Marshall County Chamber of Commerce 227 2nd Avenue North, Lewisburg, TN 37091 (Phone) 931-359-3863 PICTURE DATE WILL BE ANNOUNCED NAME OF SPONSOR(S):_____



LITTLE JUNIOR MISS MARSHALL COUNTY 2017 Presented by the Marshall County Chamber of Commerce Saturday, February 4, 2017 at 5:00 PM Marshall County Community Theatre on the Lewisburg Square Open to Ages 10-12 DEADLINE: Friday. January 20. 2017

NAME: _____

AGE: _____DOB:_____PARENTS E-MAIL:_____

ADDRESS:

TELEPHONE NUMBER: Alternate number where a message may be left: _____

PARENTS NAME: ______

WHAT SCHOOL DO YOU ATTEND? WHAT GRADE ARE YOU CURRENTLY IN?

WHAT EXTRA CURRICULAR ACTIVITIES DO YOU PARTICIPATE IN?

WHAT ARE A FEW OF YOUR HOBBIES?

PARENTS FILL OUT: *I am allowing my child, ______, to participate in the 2017 Little Junior Miss Pageant.*

PARENT SIGNATURE:

Applicant must attend Marshall County Schools or be home schooled in Marshall County. At least one parent must reside in Marshall County. <u>There will be a formal</u> wear competition only. Sponsorship fee is \$40.00. Any Business or parent may sponsor a contestant (Split sponsorships welcome, limit two)

Mail application or drop off at: (For after hours use night drop) Marshall County Chamber of Commerce 227 2nd Avenue North, Lewisburg, TN 37091 (Phone) 931-359-3863 *****PICTURE DATE WILL BE ANNOUNCED** NAME OF SPONSOR(S):_____