

ENTRY FORM

# 2017 Miss Teen Kentucky County Fair Pageant



**NOTE: THIS INFORMATION COULD BE READ DURING THE PAGEANT**

Type information on entry form. Do not add additional sheets. Handwritten applications will not be accepted.  
A digital copy of this form is available at [www.kafs.net](http://www.kafs.net)

County Fair representing \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ (As Of 10-14-17) Birthday \_\_\_\_\_

Parents' Name(s) \_\_\_\_\_

Daytime Phone ( ) \_\_\_\_\_ Address \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ e-mail address (you regularly check) \_\_\_\_\_

Clubs and Activities \_\_\_\_\_

Hobbies \_\_\_\_\_

What are your adult goals? \_\_\_\_\_

Which one of your teachers has influenced you, and how?: \_\_\_\_\_

What is one thing that you would like everyone to know about you (and explain): \_\_\_\_\_

What is the last community service you were involved in (and explain)? \_\_\_\_\_

\*\*\*\*\*

I have read pageant rules and release form and agree to abide by them. Failure to do so may result in a disqualification. All 3 signatures are required.

Contestant Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

County Chairperson Name & Signature: \_\_\_\_\_

T-Shirt size preferred:  
Please Circle One  
**(adult sizes only)**  
S M L XL

**\*\*\* You must send a copy of your birth certificate with this Entry Form \*\*\***

RELEASE FORM

Contestant's Name: \_\_\_\_\_ Fair \_\_\_\_\_

Name you want on badge: \_\_\_\_\_

(This is the first name you regularly use and what the other contestants will know you as)

**Sponsor must have paid 2017 membership dues and pageant fees for contestant to be eligible.**

(You can check this by going to our web site, [www.kafs.net](http://www.kafs.net), and clicking on the member's name. If there is a contact person listed for your pageant, all dues and fees have been paid. If there is no one listed, the pageant is not eligible for state competition.)

If chosen 2017 Miss Teen Kentucky County Fair, I (we) agree to attend all functions that the Kentucky Association of Fairs and Horse Shows arranges for me to attend. If, after receiving the title of Miss Teen Kentucky County Fair, I should marry or conduct myself in such a manner unbecoming to my title, I (we) agree to forfeit my title, crown, banner, and prize money to the first runner-up.

The Kentucky Association of Fairs and Horse Shows, Inc. and all their employees, agents and servants cannot be held responsible for accidents, injury or loss of personal property relating to this event. Judges decisions are final.

In addition, I (we) agree all photographs, film, videotape and other publicity materials resulting from my association with and participation in the Miss Teen Kentucky County Fair Pageant will become the property of the Kentucky Association of Fairs and Horse Shows, Inc. to be used as the Association sees fit and without compensation to me.

I (we) hold harmless the Kentucky Association of Fairs and Horse Shows, Inc., their agents, servants and employees against all claims or demands arising or resulting from my participation in the Miss Teen Kentucky County Fair Pageant. Without limitations, the Kentucky Association of Fairs and Horse Shows, Inc. shall not be responsible for any damages to property, equipment and/or clothing, bodily injury, sickness, mental anguish or death from any cause in conjunction with the Miss Teen Kentucky County Fair Pageant.

OPTIONAL: [ ] By initialing here, I (we) have given permission for the Association to release my name, address, age, phone number and any other personal information to other parties interested in contacting me.

**ENTRY FORM SHOULD BE SUBMITTED NO LATER THAN 30 DAYS AFTER THE COMPLETION OF YOUR LOCAL FAIR.**

**ENTRIES RECEIVED AFTER OCT. 1 WILL RESULT IN AUTOMATIC DISQUALIFICATION.**

**A COPY OF YOUR BIRTH CERTIFICATE MUST ACCOMPANY THIS FORM.**

**Return Entry and Birth Certificate To:**

**K.A.F.H.S.**

**Gib Gosser**

**P. O. BOX 361**

**Somerset, Kentucky 42502-0361**