



Mardi Gras Queen Pageant



APPLICATION

Name: _____ Age: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (cell): _____ e-mail address: _____

High School Attended: _____

College Major: _____

Fun Fact about yourself or your childhood (Info may be used in the Pageant program): _____

**Please email a high resolution baby photo to chamber.pville@gmail.com.
(Picture may be used in the Pageant program)**

Sponsor: _____ Sponsor's Phone: _____

Sponsor's Address: _____

I have read the Rules & Regulations for the Mardi Gras Queen Pageant & I hereby agree to comply with said rules. Any failure on my part to comply with these rules & regulations will disqualify me as a contestant or from retaining any title and scholarship I might win.

Signature of Contestant

Signature Parent/Guardian (if contestant is under 18 years of age)
