



SOUTHWEST FESTIVAL
OFFICIAL KENTUCKY STATE FESTIVAL
PAGEANT PRELIMINARY
OFFICIAL PAGEANT USE

AGE DIVISION _____
CONTESTANT # _____

(Please Print)

Name: _____

Age: _____

Telephone: Number: _____ Email Address: _____

Mailing Address: _____

Parents: _____

Hair Color: _____ Eye Color: _____

Height: _____ Grade: _____

School Attending: _____

Hobbies/Interests/Honors: _____

Future Plans: _____

I release the pageant directors and place where the pageant is being held of any liabilities of injury, illness, or loss of articles that may occur before, during or after the pageant. By participating in this pageant, I am giving permission for photos of myself to be used in print or on the internet for this pageant's promotions. I also understand that any display of unsportsmanlike behavior will result in disqualification without refund or awards.

Signature of Contestant or Legal Guardian

Date