## **2025 AUSTIN COUNTY FAIR**

	rs old – Must be 14 by the beginn	
Contestant's Name:		
Age:	Date of Birth:	
Eye Color:	Hair:	
Name of Parents or Guardian		
Address	City	Zip
Phone:	Parents cell:	
School	Grade	
Extracurricular Activities: (i.e. I	Dance, Softball, Gymnastics, 4-H,	etc.)
If you could make one wish, wha	t would it be and why:	
A word that best describes you: _		
What are your future goals:		
What is your greatest accomplishment:		
Names and ages of brothers & sig	sters:	
Do you have a pet?		
	MINOR'S RELEASE that it is satisfactory for our min	
including its officers, directors, any liability for bodily injury or a participant in any of the event release, the contestant gives per	ve do not hold the Austin County agents, servants and/or employe any other damage or loss sustain s listed hereon. It is also agreed mission to use any pictures for v without compensation or prior p	es, responsible for ned or suffered while that by signing this ideo presentation,
Signature of Parent or Guardian		
<b>-</b> 1.	Office Use Only	
Pd \$	CK#_ Cash	
Photogenic: yes or no	If yes, how many pict	ures
Newspaper photo: yes or no		