

RULES & REGULATIONS FOR PAGEANT DAY

In order for the event to run smoothly, we must ask that all contestants observe these few simple rules. Failure to adhere to these rules can result in the disqualification of the contestant and her removal from the Pageant.

- **This is a smoke-free, drug-free and alcohol-free event. Contestants will be disqualified without refund for violating!**
- Courtesy and proper language is required when dealing with other contestants, pageant staff, and production staff.
- Contestants, parents, friends, relatives, etc. are not to approach the judges or auditors at any time for any reason.
- Once you've registered with the Pageant, you may not leave the venue until the conclusion of the event. You must participate in all pageant activities.
- **Each contestant must be prepared and ready for the pageant at the time of arrival. As parents and others will NOT be allowed in the dressing areas and the contestant will need to be able to touch up their makeup and hair themselves. However, we will have assistants to assist with any wardrobe attire.**
- **NO VISITORS** will be allowed in or around the dressing room or backstage area at any time!
- **Please clean up before leaving!**
- You are expected to take care of your own clothing, spending money, and other valuables. The Pageant will not be held responsible for the loss of any of these items.

The signature(s) below signify that I (we) have read, understand, and agree to abide by the above rules and regulations (the rules). I (we) acknowledge that failure to abide by the rules can result in my disqualification and removal from the competition, or the loss of the title should it be discovered, after my crowning, that I had failed to abide to the rules. With written notice to my attention, Spring Mountain Festival Pageant, reserves the right to amend these rules at any time.

Contestant signature: _____ Date: _____

Parent's signature: _____ Date: _____

(If contestant is under 18 years of age)

MEDICAL RELEASE

Contestants Name: _____

Emergency Contact: _____ Phone: _____

Insurance Company: _____

Policy Number: _____

I hereby attest to the fact I am presently in good physical condition and have no known health restrictions which would limit my active participation in the Spring Mountain Festival Association Teen and Queen Pageant and or other Spring Mountain Festival activities.

Medical Information:

Medical conditions you are currently being treated for: _____

Medications you are currently taking: _____

Allergies (Including Medications): _____

If you have or have had in the past any of the following, please circle:

Epilepsy Diabetes Asthma High Blood Pressure Other (Specify) _____

Parent / Contestant Consent for medical diagnosis, treatment, billing of insurance, and release of liability (Parental signature is needed for minors and delegates who are on their parent's insurance).

I (we) hereby consent to allow the Spring Mountain Festival to select a hospital, clinic, or other medical facility that shall be authorized to diagnose and treat (contestant's name) _____ for any medical problem that may occur during participation in the Spring Mountain Festival Teen/Queen Pageant and/or any other Spring Mountain Festival activities. In addition, I (we) hereby give permission to those granting services to bill my (our) Insurance Company listed for any and all services rendered. I (we) agree that by participating: 1) There are inherent risks of injury. 2) I (we) knowing assume those risks and agree to identify and hold harmless the Spring Mountain Festival for all injuries sustained, except those caused by the Spring Mountain Festival Pageant's sole negligence.

Contestant Signature
Date

Parent/Guardian Signature

