



2025 CONTESTANT APPLICATION
TO BE USED WHEN APPLYING FOR ANY LOCAL COMPETITION

CHECK ONE: ( ) Miss Delegate ( ) Teen Delegate

Local Competition to which delegate is applying: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Delegate's Phone: \_\_\_\_\_ Delegate's Email: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

I am enrolled at \_\_\_\_\_ school as a \_\_\_\_\_

Type of Talent: \_\_\_\_\_ Title of Talent Selection (subject to approval): \_\_\_\_\_

Community Service Initiative (CSI) \_\_\_\_\_

The above information is true and correct to the best of my knowledge. I agree to meet all deadlines set forth by the Miss Georgia Scholarship Competition and by the LOCAL board to which I am applying and further understand I must complete the following:

- READ and COMPLETE the Miss Georgia local contract, which can be found on the Miss Georgia website (www.missgeorgia.net). UNDERSTAND that by signing and turning said contract into the local competition for which you are applying, you agree to abide by it and fulfill all duties required as an outstanding teen local titleholder.
UNDERTSAND that acceptance of the talent request will be granted according to the date the information is received by the person designated by the local competition for which you are applying.
RETURN APPLICATION to the Local Director of the competition for which you are competing.
UNDERSTAND that you must register with and pay \$39.99 to the Miss America Organization before you can participate in any local. (https://www.missamerica.org/register/) This is a one-time annual payment. Once you have paid the \$39.99, you still must register with MAO for every local. You will use the bypass link for every subsequent local after the payment of the \$39.99. That link is Miss America Registration Bypass Link
UNDERSTAND that for every local you must pay the American Heart Association \$30. The link for payment of this \$30 is found on the Miss Georgia website under the tab 2025 Local Paperwork
FURTHER UNDERSTAND that a payment of \$75 is required before you will be allowed to compete in the local for which you are applying. This fee is paid directly to the local organization and is to be paid to each local in which you compete.
ALSO ACCEPT that you are required to purchase (if you have not already done so) for the health & fitness phase of competition Rebel Red Athletic Wear from their Miss America collection ( https://www.rebelathletic.com/mao.html ) Use code MAOGA8 for a discount. You must use the web browser to get the discount.
COMPLETE all paperwork required by the local competition for which you are applying.

Contestant Signature

Date

Parent/Guardian Signature

Date

**HOLD HARMLESS AGREEMENT**

I hereby release the Miss Georgia Scholarship Competition and its Directors and the directors of all Local Competitions from any injury, loss, or theft sustained or resulting from my daughter's participation in this competition.

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

Date \_\_\_\_\_