

# Contestant Information Sheet

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

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

\_\_\_\_\_

**Email:** \_\_\_\_\_

**Cell:** \_\_\_\_\_

**School/University:** \_\_\_\_\_

## Emergency Contact

**Name:** \_\_\_\_\_ **Number:** \_\_\_\_\_

**List of Allergies & Treatment in the event of a reaction:** \_\_\_\_\_

\_\_\_\_\_

**Known Medical Conditions:** \_\_\_\_\_

\_\_\_\_\_

**List of Medications:** \_\_\_\_\_

\_\_\_\_\_

## ELIGIBILITY

- ☐ I have registered with Club Miss America
- ☐ I have registered for this LOCAL pageant
- ☐ I have raised the mandatory \$30 to compete in Miss Trussville/Miss Trussville's Teen and have verified that it is in my Miss America/Go Red for Women Spotfund account.

**Miss or Teen Division:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

## TALENT PRESENTATION

**Type of Talent (Vocal, Dance, Instrument, etc.):** \_\_\_\_\_

**Name of Talent Piece:** \_\_\_\_\_

## **Type of microphone preferred, if applicable:**

- ☐ Cordless
- ☐ Microphone with Stand
- ☐ Lavalier

**TALENT INTRODUCTION:**

Provide a **short** 2-3 sentence introduction for your talent presentation below:

**HEALTH AND FITNESS PRESENTATION****FITNESS INTRODUCTION:**

Provide a **short** 2-3 sentences describing *how you are heart healthy* to be read during your fitness presentation below:

**ACKNOWLEDGMENT OF UNDERSTANDING AND STATEMENT OF ELIGIBILITY**

By electronically signing this document, I attest that all information contained herein is true and accurate. Further, I understand that certain information will be used in the local competition script.

**Contestant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_  
**(if Contestant is under 18)**