

Hanover Community Support Services, Inc. Presents

MISS HANOVER ABILITIES PAGEANT

Sponsored by:

The Pageant Where EVERYONE Is A STAR!

You are eligible if you:

- * Are a female ages 13 and older
- * Have a developmental disability and
- * Live in Caroline, Chesterfield, Goochland, Hanover, Henrico, King William, New Kent and Richmond City



The Miss Hanover Abilities Pageant is the pageant for you! Celebrate your abilities! Contestants will compete in Casual Wear, Evening Wear, Interview, and Talent Competitions.

Every contestant will receive a tiara for participating.
One lucky contestant will be crowned Miss Hanover Abilities!

To Become a Contestant:

*Fill out the application on the back of this flyer
(applications also available online)

*Mail application & \$35 entrance fee **by February 7, 2026 to Hanover Community Support Services, PO Box 1594 Ashland, Virginia 23005.**

*Further information about contestant eligibility, information meeting, rehearsals, hair and makeup will be delivered at the February 21st Parent Meeting!

For more information, please call 804-221-3776

Miss Hanover Abilities Pageant

Saturday, March 7, 2026

6:00 PM

***Mechanicsville High School
Auditorium***

*7052 Mechanicsville Turnpike,
Mechanicsville, VA 23111*

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Hanover Community Support Services

MISS HANOVER ABILITIES PAGEANT

Miss Hanover Abilities Participation Application

Contestant Name: _____

Parent or Guardian's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Current Age: _____ T-Shirt Size: _____

Contestant's Phone Number: (____) ____-____ (h) (____) ____-____ (c)

Contestant's Email: _____

Parent/Guardian's Phone Number: (____) ____-____ (h) (____) ____-____ (c)

Parent/Guardian's Email: _____

Contestant's Disability: _____

Name of School and Grade: _____

Favorite Class: _____

Hobbies/Community Activities: _____

Talent: _____

(Important: Time limit for talent competition is 2 minutes – singing, dancing, instruments, presentation, etc. All talents must be approved by the Miss Hanover Abilities directors at the contestant meeting)

Title of Music: _____ Will you use a microphone: ☐ Hand ☐ Stand

Accommodations needed? ____ No ____ Yes If yes, please explain: _____

Contestant's Signature: _____

Parent/Guardian's Signature: _____

Mail application, and \$35 entrance fee **by February 7, 2026** to
Hanover Community Support Services, PO Box 1594 Ashland, Virginia 23005.
Checks made payable to Hanover Community Support Services

***A headshot (picture) will be required by the February 21st information meeting.