

Jefferson County Fair Pageant 2017 Entry Form

Baby Miss (Females Ages 1 Day to 12 Months)

First Name:

Last Name:

Date of Birth:

Hair Color:

Eye Color:

Parents/Guardians Names:

Signature of Parents/Guardians:

Email Address:

Postal Address:

Street/PO Box Number:

City & Zip:

Phone Number:

Favorite Food:

Anything else you would like to share with us
(hobbies, interest, favorite animal, etc.):

Payment can be made by mailing this form and amount due to Jefferson County Fair Pageants, PO Box 208, Jefferson City, TN 37760-0208.

Pageant questions may be emailed (tnjeffersonfair@gmail.com) , by calling between the hours of 5:30 PM to 9 PM or by texting anytime to Loretta Rummel at 423-715-0308, Kim Wright at 865-257-5627 or Kristal King at 865-850-5922.

Fees: Baby Miss _____\$30.00

Optional Contests:

Prettiest Eyes_____ \$5.00

Prettiest Hair_____ \$5.00

Prettiest Smile_____ \$5.00

Prettiest Dress/Best Dressed \$5.00

Best Personality_____ \$5.00

Most Photogenic_____ \$5.00

Best Deal_ All optional contests_____ \$25.00

Note: Circle the contests you are paying for.