



APPLICATION FOR TINY KING AND QUEEN PAGEANT

Warren Italian-American Festival dates: August 11, 12, 13, and 14, 2011

Pageant date/time: Thursday, August 11, 6:00 p.m.

Please Type or Print:

NAME _____ PHONE (____) _____
Last First Middle

ADDRESS _____ COUNTY _____

CITY _____ STATE _____ ZIP CODE _____

HEIGHT _____ WEIGHT _____ HAIR COLOR _____ EYE COLOR _____

DATE OF BIRTH _____ ORIGIN OF ITALIAN HERITAGE _____

CONTESTANTS MAY HAVE A SPONSOR PAY THEIR ENTRY FEE (OPTIONAL):

NAME OF SPONSOR/BUSINESS _____

BUSINESS ADDRESS _____ CITY _____ STATE _____ PH. _____

RULES AND REGULATIONS

- 1 Contestant must be at least 4 and no older than 6 on the day of the pageant.
- 2 Contestant must reside in Trumbull or abutting counties.
- 3 Contestant must be of Italian Heritage on side of either parent.
- 4 Contestant must provide birth certificate.
- 5 All contestants must arrive no later than 4:30 p.m. on the day of the pageant.
- 6 Contestant must not use props of any kind in pageant.
- 7 If applicant has been previously chosen as WIAFC Tiny King or Queen, their application will automatically be eliminated in order to give other applicants a chance at the title.
- 8 Decision of judges is final.
- 9 **The number of applicants is limited. No applications will be accepted once practices have started.**

Please return the following to: **Mrs. Tammy Baker**
1220 Four Winds Court
Niles, Ohio 44446 Phone: **330-301-2924**

- _____ Signed application
- _____ (1) wallet-size photo (with name on back)
- _____ \$25.00 registration fee --- make checks payable to Warren Italian Festival

All applicants will be notified of acceptance after receipt of application by Tiny King and Queen Chairperson.

By signing below, I the parent or guardian give permission to the WIAFC, Inc. to use the contestant's photograph and name for publicity purposes and future pageant material. In addition, I hereby release the WIAFC, Inc. from any and all claims for damages directly or indirectly resulting from the contestant participating in the pageant.

Signature _____ Date _____
Parent or Guardian