Little Miss Greene County

Entry Form

Contestant Name: _____

Age (On the day of the event): _____ Birthdate: _____

Eyes: _____ Hair: _____

Address: _____

_____

Phone: _____

Parents: _____

School: _____ Grade: _____

Favorite Color: _____

Favorite Food or Restaurant: _____

What Do You Want to be When You Grow Up? _____

_____

_____

Hobbies: _____

_____

_____

What Division (See Rules): _____

Entry Fee $10.00 Photogenic fee $5.00

Parent/Guardian Signature: _____