The following forms and fees need to be completed and returned **PRIOR TO THE DEADLINE of Friday, November 9th, 2018**.

**SEND VIA EMAIL TO:**

**manateecountypageants@gmail.com**

1. THIS CHECKLIST completed on the bottom **ADDITIONAL REQUIREMENT:**

The Miss America Organization requires that each local contestant raise a minimum

1. Contestant Resume’ of $100.00 for the Children’s Miracle

Network Hospital. In order to compete

please visit:

3. Platform Statement <http://www.missamericaforkids.org/contestantsearch>

to register and track your fundraising. If this

requirement is not met by the day of the

4. Talent Information Form pageant competition, the contestant will be

disqualified and will not be permitted to

compete. You must bring out a print out from the CMNH website showing you qualify the day of the pageant.

5. Copy of birth certificate and/or driver’s license

6. One 5 X 7 Headshot photo **JPG** format

**MAIL OR BRING ON THE DAY OF COMPETITION:**

**Manatee County Pageants, 7305 Birds Eye Terrace, Bradenton, FL 34203**

7. Talent Music – 2 CDS with your name on them

8. Notarized Local Pageant Contract with attachments

Contestant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contestant Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contestant Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Email: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_

**Entry forms should arrive by Friday, November 9th, 2018**