		111116633 (71963 7 10) _	Duchess (Ages 11-14)
		Please use	
	<u> </u>	Blue or Black Ink Only	
ntestant Name:			
:kname:			
DB:	Age	e as of Pageant Date: _	
dress:			
unty:	Phone: _		Alt Phone:
rent(s):			
ent(s) Email:			
andparent(s): _			
nool or Daycare	Enrolled in:		
vorite Rodeo Eve	ent:		
vorite Rodeo Co	wboy/Cowgirl:		
en I grow up, I v	vant to be:		

My hobbies are:	
My pets are:	
Office Use Only	
Paid \$35 by Cash Cashier's Check I	Money Order Date Paid:
Payment Accepted By:	Date Accepted:

Release Agreement

By my signature on this application, I hereby certify that I have read the regulations governing the Miss Trinity Valley Exposition Pageant, and that I acknowledge these regulations.

That I hereby grant permission to the Trinity Valley Exposition to verify any information contained on my application.

That I hereby release the Trinity Valley Exposition from responsibility of injury or loss to persons or property, involving me or persons, relative to my contest appearance, sponsors, commercial and private or the contest and all officers, directors and member individuals and groups of the contest.

That I hereby release title, claim and rights to photographs and/or public relations materials involving me to the contest for use in contest promotion.

That I hereby affix my signature attesting my agreement to the above without reserve.

Contestant signature	Date	
Parent or Legal Guardian	Date	
This document was acknowledged before me by the said of, 2024.	, on this theday	
Notary Public in and for the State of		