

WIRT COUNTY FAIR PAGEANTS

wirtcountyfairpageants@gmail.com

Contestant Name: _____

Age: (as of 08/03/23) _____ **Date of Birth:** _____

Parent/Guardian(s): _____

Street Address: _____

Phone Number: _____ **Email:** _____

Sponsor(s): _____ **T-Shirt Size:** _____

School & Community Activities:

Interests & Hobbies:

Awards/Honors/Achievements:

Ambition:

Three (3) Favorite Foods:

Three (3) words that best describes you:

Contestant Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

Please return your completed Application, 5x7 Headshot Photo, and Entry Fee by June 30th, 2023 to:

Marcie Watson

4168 Newark Rd
Elizabeth, WV 26143

OR

Dick's Market & Deli
Elizabeth Town Hall

Please make checks payable to the Wirt County Fair Association. In the Memo put Pageant and Contestant Name.

(Miss: \$100) (Teen: \$75) (Pre-Teen: \$75)