

# Little/Petite Miss Greater Watertown 2009 Application



CONESTANT'S NAME: \_\_\_\_\_

PARENTS NAMES: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE # \_\_\_\_\_ EMERGENCY # \_\_\_\_\_

ALLERGIES: \_\_\_\_\_

AGE AS OF MARCH 2009: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

DO YOU CURRENTLY HOLD A TITLE? \_\_\_\_\_ NAME OF TITLE: \_\_\_\_\_

DIRECTOR'S NAME, PHONE, EMAIL: \_\_\_\_\_

Entry fee must be paid in full and mailed to:

Avril Fraser  
112A Falls Terrace  
Oakville, CT 06779  
945-9066 avrilmis@gamil.com

I give my child permission to participate in Little/Petite Miss Watertown 2009. I understand that this is a fundraiser for the Miss Greater Watertown Scholarship Program. It is a fun and light hearted event that is meant to be a great way for young girls to express themselves. I feel my daughter can fully represent herself and our community in a positive manner throughout the upcoming year. Parents will not be allowed to watch rehearsals but are welcome to stay in the waiting room. One female companion per contestant will be allowed backstage during the performance. This is not required and there will be plenty of backstage help. Entrance fee is non-refundable. All decisions made by the judges are final. Rehearsals are very important and should not be missed unless it is an emergency. If you have any questions please contact Dana Daunis at 203-509-8343 or DanaDaunis@gmail.com

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ \$100 Entrance Fee Payable to: MGWSP

\_\_\_\_\_ (optional) \$25 Photogenic Fee to "MGWSP"

\_\_\_\_\_ \$50 Fee to "Images" for Photogenic

\_\_\_\_\_ Total      Check Number: \_\_\_\_\_