

# **Little Miss Azalea Contest Agreement**

**Parent/guardian**

I hereby give my permission for my child: \_\_\_\_\_ to participate in the Little Miss Azalea Contest, March 18, 2017 in White Springs, Florida. I hereby certify my child to be 6-11 years old. My child is a resident of Hamilton, Suwannee or Columbia County, Florida. I agree that my child and I will solicit donations and that for each dollar collected, my child will receive one point. The child with the most points will be Little Miss Azalea. There will be a First Runner-Up and a Second Runner-up. Should my child be the winner, she will participate in the Festival of Lights parade and will attend any other special events if requested by the Special Events Committee. I hereby agree that I will submit all donations collected to the Committee at Town Hall no later than 4 p.m. March 11<sup>th</sup>, 2017. I agree that if I do not abide by this agreement, my child will not be eligible to participate in future Miss Azalea Contests.

\_\_\_\_\_ **Signature**

\_\_\_\_\_ **Witness**

\_\_\_\_\_ **Date**

**Applicant Full Name** \_\_\_\_\_

**Applicant Mailing Address** \_\_\_\_\_

**Applicant Date of Birth** \_\_\_\_\_

**Contact Phone Number** \_\_\_\_\_

**For more info please contact: Coretta Ford (386) 288-4540 email:mz\_cee@hotmail.com**

