



MISS LIBERTYVILLE PAGEANT APPLICATION

NAME_____

AGE_____DATE OF BIRTH_____

HEIGHT_____EYE COLOR_____HAIR COLOR_____

CURRENT OCCUPATION AND TITLE_____

SCHOOL_____

GRADE YOU WILL BE NEXT SCHOOL YEAR_____

PARENTS' NAMES_____

SIBLINGS' NAMES & AGES_____

FAVORITES:

FOOD_____COLOR_____

CHARITY_____SPORT_____

FLOWER_____BOOK_____

MOVIE_____SONG_____

PAST-TIME_____SCHOOL SUBJECT_____

TV SHOW_____ACTOR/ACTRESS_____

MUSICAL GROUP_____VACATION PLACE_____

WHAT IS YOUR MOST MEMORABLE EVENT? _____

WHAT PERSON WOULD YOU MOST LIKE TO MEET? _____

WHAT IS YOUR DAILY PHILOSOPHY? _____



LIST ANY INTERESTING FACTS ABOUT YOUR FAMILY _____

LIST ANY ORGANIZATIONS OR SPORTS TO WHICH YOU BELONG, AWARDS YOU RECEIVED,
CONTESTS YOU WON, AND ANYTHING YOU FEEL WAS A MAJOR ACCOMPLISHMENT _____

WHAT IS THE BEST ADVICE YOU HAVE EVER RECEIVED? _____

TELL US ABOUT YOUR CAREER GOALS _____

WHAT DO YOU LIKE MOST ABOUT LIBERTYVILLE? _____

WHERE IS YOUR FAVORITE PLACE IN LIBERTYVILLE? _____

IF YOU COULD DELIEVER A MESSAGE TO YOUR PEERS, WHAT WOULD IT BE? _____

IF YOU WERE TO WIN THIS TITLE, HOW WOULD YOU BENEFIT FROM THE EXPERIENCE? _____

WHAT IS THE MOST IMPORTANT QUALITY A QUEEN SHOULD HAVE? _____

WHY WOULD YOU BE A GOOD MISS LIBERTYVILLE? _____

TELL US ANY ADDITIONAL INFORMATION THAT YOU FEEL MIGHT BE OF INTEREST: _____



Miss Libertyville Pageant Application

I agree that I (participant) meet all the eligibility requirements to be a participant and agree to abide with all the rules set forth in the Official Rules and Information described in the section titled "Miss Libertyville Pageant Rules and Eligibility". I agree that if I am chosen as the Miss Libertyville I will serve as a Libertyville Ambassador and represent MainStreet Libertyville. Furthermore, I agree to and understand that if for any reason I cannot fulfill the expressed duties as described in the rules, violate any rule set forth, or conduct myself in a manner unbecoming of a queen and representative of Libertyville, I will immediately relinquish the title, crown, sash and all prizes awarded upon the direction of the Libertyville Pageant Director at which time the 1st runner up will then be eligible for the title.

PRINTED NAME: _____
(PARTICIPANT)

IF UNDER 18 SIGNED: _____ DATE: _____
(PARENT OR GUARDIAN)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ CELL: _____

E-MAIL ADDRESS: _____

SUBMIT YOUR COMPLETED APPLICATION ALONG WITH YOUR \$75.00 APPLICATION FEE TO:

LIBERTYVILLE PAGEANTS
C/O BUNNY OTREMBIAK
905 GARFIELD
LIBERTYVILLE, IL 60048

CHECKS PAYABLE TO "LIBERTYVILLE PAGEANTS"