

2024
IzardCountyFairBeautyPageants
Age0months–9years ofage

Friday August 9,2024

Amphitheater, Izard County Fairgrounds

**Entries can be mailed or paid at the time of
the pageant.**

Registration Fee – \$25.00 and must be included with entry form if mailed.

Make Checks Payable to: Izard County Fair

Mailing address: Izard County EHC, PO BOX 1002, Melbourne, AR 72556

The first pageant will start at 7:00 pm and the other pageants will follow immediately one after another.

Eligibility Rules for Izard County Pageants

1. **All contestants must reside in Izard County or attend school in Izard County.** Contestants must have been born a female. Contestants cannot be, or at anytime have been married, pregnant, or have given birth to a child or had an abortion. A contestant must have not ever have been convicted of a crime or have criminal charges pending.
2. **Age of the contestant is determined by the date of the contest.**
3. The previous year's winner in each division is not eligible to compete in that division this year. However, if they qualify by age to move up to the next division they may do so. **Contestants for the Izard CountyFair Pageants are only eligible to enter a fair pageant in one county.**In the event a contestant whose parents are divorced and reside in different counties and has been court ordered to reside jointly with both parents, the contestant can only compete in one of the two counties in which the parents reside. The contestant must choose the county to enter.
4. **Each contestant age0 months-9years must pay an entry fee of \$25.00 and it must be submitted with the entry form.** All entry forms must be typed or printed with blue or black ink and signed by parent or guardian.
5. The judge's decision is final, and names of judges will not be released after the contest.
6. Any dress length is permitted.

Only one ADULT and contestant will be allowed behind the staging area.

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ThisapplicationmustbereturnedwiththeEntryFee

PleaseCheckAge Division

Tiny Miss (0-24mos) _____ Tiny Mr.(0-24mos)_____ Little Miss(3-5year-old)_____

Little Mr. (3–5-year-old)_____Petite Miss (6-9 years-old)____

Contestant'sName_____

Age_____ Birthday_____ HairColor_____ Eye Color_____

Parent's Name_____

Mailing Address_____

TelephoneNumber_____ Email_____ If

enrolledinschool,listnameofschooland grade_____

ForPetiteMissContestantsOnly:

Hobbies_____

By signing below the parent or guardian of contestant certify they have read the rules and agree to comply with the rules of the pageant and release the Izard County Fair Association and the board members and fair volunteers and Izard County EHC of any liability incurred during the pageant.

Signature of Parent or Guardian_____Date_____