

2019 American Legion County Fair Queen Entry Form
Department 22 - Section 4 - Class 1

Name: _____ Phone: _____
As you would like it printed in the Program Booklet

Address: _____

City, _____ State, _____ Zip: _____

County: _____ Date of Birth: _____ Age as of June 1, 2019 _____

Initial _____

Premiums: Fair Queen - \$500.00 - Princess - \$250.00

I agree that as a Contestant in the American Legion County Fair Queen Contest I will abide by all Local and State Rules, and Requirements, as set forth by the American Legion County Fair Queen Program and the PA State Fair Queen Program.

I agree that in the event I am not crowned as queen I will still represent the Fair as an Ambassador following the rules as set forth including but not limited to dress code, conduct rules.

I agree to be an active member of the annual Fair Queen Court's Veterans Support Fundraiser

Contestant Signature

Parent/Guardian Signature

