

2024 Jr. MISS HARDYSTON PAGEANT

Ages 8-12



The Hardyston Pageant will be held on Friday, June 7th at the Hardyston Township Municipal Building, 149 Wheatsworth Road, Hardyston. Ceremony will begin promptly at 7:00 pm.

Applicant Name: _____

Email: _____ Phone Number: _____

Please complete this application in ink - print legibly and completely. This application will be photocopied and given to the judges. The information on this application will also be used by the pageants emcee. Applications will be accepted before Friday, May 24, 2024 at the Hardyston Town Hall, 149 Wheatsworth Road, Hardyston, NJ 07419. If you have any questions, please call (973) 823-7020

Candidates must abide by the following:

1. Must be female between the ages of 8 and 12 years of age.
2. Must be year-round residents of Hardyston Township.
3. Must wear proper attire, no jeans or casual attire.

PART I: Eligibility (circle one)

- | | | |
|--|-----|----|
| 1. Are you a resident of Hardyston Township | YES | NO |
| 2. Are you at least 8 years old? | YES | NO |
| 3. Will you reach the age of 13 before June 7, 2024? | YES | NO |
| 4. Have you ever held the title of Jr. Miss Hardyston? | YES | NO |

A **“YES”** answer to question #4 makes a contestant ineligible to compete.

PART II: ABOUT YOU

1. Age (as of June 7, 2024): _____

2. Date of Birth: ____/____/____

3. Your Favorites:

Color: _____

Movie: _____

Song: _____

Food: _____

Singer/Group: _____

4. If you could be granted ONE wish, what would it be and why?

5. What grade are you in? What school are you attending?

6. What is your favorite subject in school?

7. List any organizations to which you belong, awards you have received, contests you have won, or anything else you feel has been a major accomplishment.

8. What hobbies or activities do you participate in?

9. What is your favorite place to visit and why?

10. Tell us something special about you and/or your family.

PART III: CONFIDENTIAL INFORMATION

Contestants Full Name: _____

Address: _____

City: _____ Zip: _____

Phone:

Home: (____) ____ - _____

Cell: (____) ____ - _____

I do hereby attest that all the information on this application is true.

Contestant Signature: _____

Guardian Signature: _____

Date: _____