

2024 AASP&RC Queen's Contest

APPLICATION FOR AASP&RC QUEEN

*This form must be submitted to the Queen Program Chair,
post-marked no later than May 1st.
(The Queen will reign from Convention to Convention)*

Applicant's Name: _____

Street Address: _____

City, State, Zip: _____

Mobile Phone: _____

Home Phone: _____

Region #: _____ District #: _____

Home Club: _____

Emergency Contact: _____

Emergency Contact's Phone: _____

By signing below, I hereby acknowledge receipt of a copy of the Queen's Contest Rules and Requirements, and I agree to them as stated.

Signature: _____

Date: _____

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If under the age of 18, a parent or legal guardian must also sign and date. Forms submitted for individuals under 18 without parental/guardian consent and signature will NOT be considered complete and the contestant will not be allowed to participate in the Queen Contest.

Parent/Legal Guardian's Signature: _____

Date: _____