



Children's Photogenic Contest

Entry Form

Return this page only

Child's Name: _____ (circle): Male or Female

Date of Birth: _____ Child's T-Shirt Size: (Month /T/ or Youth sizes) _____

Guardian Name: _____ Relation: _____

Address: _____

Contact Number: _____ Email: _____

(Check Appropriate One)

Child's Age as of May 25, 2024

_____ 0-6 Months _____ 7-12 Months _____ 13-18 Months
_____ 19-23 Months _____ 2-3 Years _____ 4-5 Years

Will your child participate in the parade: ___ Yes ___ No

You must supply vehicle/ transportation for participants. (Parade is festival permitting)

I HEARBY CERTIFY AS THE PARENT OR LEGAL GUARDIAN OF (child's name) _____ THAT I AM SOLELY RESPONSIBLE FOR MY CHILD DURING ALL FESTIVAL EVENTS. THE CHILD LISTED ABOVE AND ANY FAMILY MEMBER ASSOCIATED WITH THAT CHILD WILL SHOW POSITIVE ATTITUDE AND GREAT SPORTSMANSHIP CONDUCT DURING ALL FESTIVAL EVENTS AND THROUGHOUT THE CONTEST PARTICIPATION. I WILL NOT HOLD THE FESTIVAL OR ANY MEMBER OR VOLUNTEER RESPONSIBLE FOR ANY INJURY OR ACCIDENT. I AGREE TO ALLOW THE FESTIVAL THE RIGHT TO PUBLISH MY CHILD'S PHOTO IN THE NEWSPAPER AND/ OR OTHER MEDIA PLATFORMS. I ACKNOWLEDGE THAT I HAVE READ ALL THE RULES AND GUIDELINES OF THE CONTEST AND AGREE.

Parent/ Guardian Signature

Date