

# Miss Georgia

Official Licensee of the Miss America Organization

## 2023 MISS CANDIDATE APPLICATION TO BE USED WHEN APPLYING FOR ANY LOCAL COMPETITION

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Candidate's Phone: \_\_\_\_\_ Candidate's Email: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_ Parent's Email: \_\_\_\_\_

I am enrolled at \_\_\_\_\_ school/university as a \_\_\_\_\_

Type of Talent: \_\_\_\_\_ Title of Talent Selection (subject to approval): \_\_\_\_\_

Social Impact Initiative (Platform) \_\_\_\_\_

The above information is true and correct to the best of my knowledge. I agree to meet all deadlines set forth by the Miss Georgia Scholarship Competition and by the LOCAL board to which I am applying and further understand I must complete the following:

- **READ** and **COMPLETE** the Miss Georgia local contract, which can be found on the Miss Georgia website ([www.missgeorgia.net](http://www.missgeorgia.net)). **UNDERSTAND** that by signing and turning said contract into the local competition for which you are applying, you agree to abide by it and fulfill all duties required as a local titleholder.
- **UNDERTSAND** that acceptance of the talent request will be granted according to the date the information is received by the person designated by the local competition for which you are applying.
- **RETURN THIS APPLICATION** to the Local Director of the competition for which you are competing.
- **UNDERSTAND** that you must register with and pay **\$35** to the Miss America Organization and further pay **\$75** in order to compete in each local. Said payments must be made before you can participate in rehearsal and any phase of competition.
- **COMPLETE** all paperwork required by the local competition for which you are applying.

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### HOLD HARMLESS AGREEMENT

I hereby release the Miss Georgia Scholarship Competition and its Directors and the Directors of all Local Competitions from any injury, loss, or theft sustained or resulting from my daughter's participation in this competition.

Candidate's Signature \_\_\_\_\_ Date \_\_\_\_\_

(If candidate is under the age of 18, parent/legal guardian must sign.)