

Georgia Sweet Potato Pageant Application

Miss Georgia Sweet Potato

September 12th, 2020 Time: 3:00pm

Location: Irwin County High School Auditorium, 149 Chieftain Circle, Ocilla Ga. 31774

Cost: \$75.00 before September 4th & \$90.00 After September 4th.

Optionals are \$10 each Smile, dress, hair (all 3 for \$25)

Make check payable to Georgia Sweet Potato Pageant

Mail to: P.O. Box 104, Ocilla, Ga. 31774 Deadline for entry: September 4th

Contact: Chamber of Commerce (229-468-9114)

Admission Price \$10.00 (hair and makeup vendors must pay admission also)

We are a beauty pageant, but we do not specify on how to dress your child. Judges will be told to choose on all girls as they see fit.

Petite, Teen, and Miss will model casual wear and evening wear. Casual wear first and then evening wear. You will introduce yourself on stage in casual wear) Your choice of outfit

Teen and miss contestants will have interviews. Time 1:00pm (interviews will be behind the auditorium in another building) signs will be posted showing where to go. You can get ready there if needed, we will open the building at 12:00pm. Teen interviews first then miss to follow.

Contestants will be numbered as we receive applications. Early apps. Get a choice of line up.

All applications must be mailed and include entrance fee.

\$30.00 FEE for returned checks.

Queens are required to attend the Sweet Potato Festival, ride in parade and VIP Breakfast on October 31st.

We will need all Queens to stay to have pictures made at the end of the pageant.

If you have any problems with anything or anyone in the pageant, please find me or one of our staff members, we do not tolerate anyone showing out at our pageants and will gladly escort them out.

Please keep this sheet for information and feel free to call us anytime with questions about the pageant.



Please type or write neatly where emcee and judges can read the info sheet.

Check division entering below:

Age Division: Teeny 1-3 _____ Tiny 4-6 _____ Little 7-9 _____

Petite 10-12 _____ Teen 13-16 _____ Miss 17-25 _____

Contestant # _____

Name _____ age _____ Phone # _____

She is the daughter of _____ from _____ Ga.

Favorite food is _____ and favorite show is _____.

She loves to _____

Honors or awards (if any) _____

Future plans are _____

Optionals--- Smile _____ Dress _____ Hair _____ (check the ones entering)

I/PARENT/GUARDIAN AGREE NOT TO HOLD THE OCILLA IRWIN CHAMBER OF COMMERCE, IRWIN COUNTY SCHOOL SYSTEM OR ANYONE ASSOCIATED WITH THE GSP FROM ANY INJURY, LOSS OR THEFT THAT MAY OCCUR DURING THE PAGEANT OR IF CHOSEN AS QUEEN.

Contestant/ parent signature: _____ date _____

Email: _____