

Registration Form for Miss Tinsel Competition 2009

Child's full Name _____ Birth date _____

Parent or Legal Guardian Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Please choose pageant level for child:

_____ Tiny Miss Tinsel (ages 3-4) _____ Little Miss Tinsel (ages 5-6)

_____ Junior Miss Tinsel (ages 7-8) _____ Miss Tinsel (ages 9-10)

Please initial the following statements:

_____ I give permission to the Downtown Partnership to use my child's essay and photo for marketing and reporting purposes. This includes Internet advertising and reporting.

_____ I understand that the Downtown Partnership is not responsible for any injury that may occur during competition and the Downtown Partnership will not be liable for any expenses incurred to the participants.

Parent/Guardian Signature

Date

Please attach your child essay answering the question: **“What is my favorite Holiday Tradition?”** The \$10 entry fee is payable to The Downtown Partnership. Entries may be mailed or dropped off to:

Clinton Downtown Partnership

721 South 2nd Street

P.O. Box 1024

Clinton, IA 52732