

2018 Atchafalaya Basin Children's Pageant

Sunday, September 30, 2018

Breaux Bridge Elementary School Gym

915 St. Charles Street

Breaux Bridge, LA 70517

Children's Entry Form

- Baby Miss Atchafalaya Basin (0-11 Months) 9:00
- Teensy Miss Atchafalaya Basin (12-23 Months) 9:20
- Tiny Miss Atchafalaya Basin (2-3 Years) 9:40
- Petite Miss Atchafalaya Basin (4-5 Years) 10:00
- Little Miss Atchafalaya Basin (6-7 Years) 10:20
- Young Miss Atchafalaya Basin (8-9 Years) 10:40

OUTGOING ROYALTY WILL NOT BE ALLOWED TO COMPETE

*****ENTRY FEE: \$40.00 (INCLUDES ONE PHOTOGENIC PICTURE)**

APPLICATIONS ARE DUE BY SEPTEMBER 27, 2018.

APPLICATIONS RECEIVED AFTER THIS DATE WILL PAY AN ADDITIONAL \$10.00 LATE FEE.

*******DOOR ENTRIES WILL BE ACCEPTED WITH LATE FEE OF \$10.00 (CASH ONLY)**

ADMISSION: \$5.00 ADULTS & CHILDREN OVER 12

(PLEASE LET YOUR GUESTS KNOW, EVERYONE PAYS EXCEPT CONTESTANTS)

Doors will open at 8:00 a.m. Please register at least 30 minutes prior to your division.

Groups will not start before time posted.

Pageant will begin at 8:30 a.m. with introduction of royalty, judges, announcement, etc.

**Attire: Sunday Best. NO PAGEANT HAIR OR MAKEUP. This is a natural beauty contest
& the judges will be aware of the rules.**

Queens will receive: Custom Crown, Monogrammed Sash & Pin

1st, 2nd & 3rd alternates will receive an award.

Photogenic winner will receive a crown.

**PAYPAL payments will be accepted with an additional \$2.00 service charge. Send to
cdumatrait@live.com**

Make checks payable to: Connie Dumatrait

Mail this application, along with payment to:

Connie Dumatrait

746 Sidney Drive

Breaux Bridge, LA 70517

For more information please contact.

Connie Dumatrait (337) 298-4891

atchafalayadirectors@gmail.com

If you would like to receive scores/comments please provide a self-addressed stamped envelope.

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CONTESTANT #: (FOR OFFICE USE ONLY) _____ Category: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____

E-MAIL: _____

AGE: _____ D.O.B. _____

PARENTS: _____

HAIR COLOR: _____ EYE COLOR: _____

SCHOOL: _____ GRADE LEVEL: _____

FAVORITE COLOR: _____

FAVORITE TV SHOW: _____

FAVORITE FOOD: _____

FAVORITE SONG: _____

HOBBIES: _____

SPONSOR: _____

We, The Atchafalaya Basin Festival, Our Lady of Mercy Catholic Church, or the Pageant Directors will not be responsible for any loss or injury to personal items or for any personal injuries that may occur during this event. We understand that the judges' decisions are final. Judges will be highly qualified and not from this area. Scores will not be posted. If you wish to receive your child's scores please provide an e-mail address. Pictures from pageant and all other events/functions attended may be posted on the Atchafalaya Basin Festival web site, social media, etc.

All entry fees are non-refundable.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY:

PAID: CASH / CHECK

PICTURE YES / NO

CHECK # _____ TOTAL AMOUNT PAID: _____

MONIES RECEIVED BY: _____ DATE: _____