

Massachusetts Princess Pageant

P. O. Box 990802 Boston, MA 02199 USA (617)989-1272 www.massprincess.tripod.com

What's included in this application package

Contestant Letter

Pageant Application and Return Envelope

Referral Rewards

Referral Rewards Form

Family & Friends Ads

Family & Friends Ads Order Form*

Sponsorship

Sponsorship Letter*

Contestant Roommate Form

*please make as many copies as needed

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Dear Contestant:

Thank you for your interest in the Massachusetts Princess Pageant!

I would like to take a few moments to give you an overview of the information that I have enclosed in this mailing. You will find an application and mailing envelope, an overview of pageant day, rules and regulations, awards, etc. Our revised preliminary pageant dates are as follows: I am confident that you will be pleased with our pageant system! We look forward to making these pageants the best for our young ladies! Enclosed you will find more information regarding pageants fees, sponsorships, awards, etc. We ask that you review this information and if you have any questions, please call me at 617-989-1272 or email me at massprincess@lycos.com.

Please note: Our local pageant is on October 17, 2004.

We ask that you register by the deadline, September 4, 2004. The registration fee is just \$25.00 by August 17, 2004 and \$50.00 thereafter. The pageant fee is \$150.00 which includes two optionals! This pageant fee is due within 14 days of receiving your completed application (please call if in need of payment plan). In addition to the pageant entry fee, we require contestants to sell just five general seating pageant tickets which cost \$15.00 each for ages 6 and up. There is no cost for children under the age of 6 years old.

If you would like to sell more tickets, you may do so and save even more! Interested? Just ask me how!

We strive to always keep these fees as afford as possible for our contestants. However, if you are in need of a payment option, please contact us to set up your interest free payment plan.

In closing, I would like to thank you again for your interest in our pageant system. I look forward to seeing and working with you.

Sincerely,

Terrina J. Williamson
Regional Director
Beautiful Pageantry of New England

Beautiful Pageantry of New England

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Pageant Contestant Application

This application is for the following pageant:

- New England Princess Pageant (young ladies, ages 13-19)
 - _____ Massachusetts
 - N/A Connecticut
 - N/A Hampshire
 - N/A Vermont
 - N/A Rhode Island
- New England Little Sweetheart Pageant (girls, ages 5-12)
 - _____ Massachusetts
 - _____ Connecticut
 - _____ New Hampshire
 - _____ Vermont
 - _____ Rhode Island
- Lady of Virtue Pageant (ladies, ages 21-28)
- Young Lady of Virtue Pageant (young ladies, ages 16-20)
- Miss Black New England Pageant (ladies, ages 20-27)
- Miss Black Teen New England Pageant (young ladies, ages 14-19)
- Bundle of Joy Pageant girls and boys, ages 6 months-6 years old)

Contestant Information

Last Name _____
First Name _____
Address _____
Apt/Suite _____
City _____
State _____
Zip Code _____
Phone (____) _____
Email _____

Clubs/Organizations _____

Honors/Awards _____

What is your current occupation/career?

What is your dream career and why?

What are your five year goals?

Personal Information

Please list your Favorites.

FOOD _____

MOVIE _____

MUSIC _____

SINGER _____

GROUP _____

MODEL _____

BOOK _____

NOVEL _____

COLOR _____

Please list three words that BEST describe you.

1. _____

2. _____

3. _____

Pageant Questions

Why do you want to compete in this pageant?

Why do you feel you should win this pageant?

What do you plan to accomplish as a winner or titleholder?

During the pageant, what will be your platform and why?

During the pageant, what is the talent you will be performing?

Have you ever participated in a pageant? If so, please give more details.

How would you rate this previous pageant experience?

Have you had any modeling, singing, acting or stage experience?
If so, please give details.

Is your family and/or are your friends supportive of your
pageantry involvement? _____ YES _____ NO
Why? Why Not?

Is there anything else you would like to share with us? If so,
please share with us below.

*Thank you for completing this application. We look forward
to having you as a contestant in this pageant. See you soon!*

PERMISSION FORM

I, _____ hereby give permission for _____ to participate in the selected pageant. I understand that by turning in this application, paying all fees and competing in the pageant does not guarantee me the winner. However by doing the fore mentioned, I am guaranteed fair judging and the opportunity to compete and be crowned as the winner, if chosen. I further understand the policy that all monies paid are non refundable, unless the pageant is cancelled. I agree to not hold the pageant, its staff and/or affiliates responsible for in the unlikely theft, damage and/or harm to myself, my guests and/or property. I agree to conduct myself in a respectful and good moral manner. I understand that if I and/or those accompanying me act in any form of a disrespectful manner that I may and can be disqualified from the pageant. I understand that all judging is fair and final. Lastly, I understand and agree to all conditions set forth in this form on this day _____ of _____, 2004.

Contestant's Signature

Date

Printed Name

Parent/Guardian's Signature

Date

Printed Name

Please send completed application along with one 3x5 headshot photo of contestant and the \$25 or \$50* registration fee by September 4, 2004 to:

Beautiful Pageantry of NE
P O Box 990802
Boston, MA 02199

Depending on date of submission.

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Contestant Agreement Form

DATE _____

CONTESTANT NAME _____
PHONE NUMBER (____) _____
PAGEANT _____

As a pageant contestant:

I agree to pay all associated fees in a timely manner and on time.

I agree to conduct myself in a honest, caring, respectful and feminine manner.

I agree to encourage my company to act in a respectful manner.

I agree to use only the official pageant mandated paperwork for sponsorship, family & friends' ads and ticket sales.

I agree to NOT ask and/or seek sponsorship for fees above the cost of your pageant entry fee(s).

I agree to show up to all pageant practices, competitions, activities, photo day(s) and shows on time and preferably 15 minutes early.

I agree to sell a minimum of 5 pageant tickets to help cover my cost and fees as pageant contestant.

I agree to return all monies received from sponsorship, family & friends' ads, tickets, etc. in a timely fashion according to preset time by pageant director.

I agree to submit any questions, worries and/or complaints to pageant director via email only. massprincess@lycos.com
You will receive a response within 48 hours or less.

I agree to fully and completely acknowledge and follow these regulations for the duration of my time as a pageant contestant.

Contestant Signature

Date

Printed Name

Parent/Guardian Signature (if under 18)

Date

Printed Name

Please submit this form with your completed application package.

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Referral Rewards

When you refer someone to the pageant, you will receive a \$5 rebate (up to \$20) off of your pageant entry fee.

To receive your rebate(s), each referral must enter pageant.

You will also be entered into a drawing, Miss Sapphire to win a special gift!

Just fill out the Referral Rewards Form and return it along with your completed application by September 3, 2004.

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Referral Rewards Form

Name of Contestant _____
Pageant _____

Referral's Name _____
Phone Number _____
Age, D O B _____
Pageant _____

Referral's Name _____
Phone Number _____
Age, D O B _____
Pageant _____

Referral's Name _____
Phone Number _____
Age, D O B _____
Pageant _____

Referral's Name _____
Phone Number _____
Age, D O B _____
Pageant _____

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Family & Friends' Ads

This is a creative way to get your family and friends involved in your pageant experience while helping you to creatively cover your pageant expenses.

A family member or friend chooses one of three pre-designed quarter page ads or a customized ad to be placed in the pageant program book.

These ads include a heading, body text and/or a b&w or color wallet size (2x3) photo of the contestant and closing.

The Pre-designed Headings include:

GOOD LUCK
NEXT CROWNED YOUNG LADY
YOU CAN DO IT

The body text may be up to two lines of 24 characters each.

The Pre-designed Closings include:

WITH LOVE
BEST WISHES
HUG & KISSES

Pre-Designed Ads cost just \$25
w/b&w photo, add \$15 w/color photo, add \$25

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Family & Friends' Ads Order Form

(Please make as many copies as needed)

Name of Contestant _____
Pageant _____

How to Place an Ad

First, chose your ad type (Pre-designed of Customized)

Second, chose Heading and Closing

Third, choose Body Text

Fourth, chose to include a photo type

Heading _____

Closing _____

Body Text _____

Photo? B&W _____ COLOR _____

Your Name _____

Address _____

City, State _____

Zip Code _____

Phone _____

Total Cost \$ _____

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Sponsorship Letter

Date _____

Dear Sir/Madam:

Good day!!! I, _____ have been chosen as a contestant in the Massachusetts Princess Pageant and I am asking that you would please help ease and meet the financial obligation of my \$150 pageant fee by sponsoring me. Any amount would be greatly appreciated, as there is no minimum dollar amount for you to sponsor.

As my sponsor, your name will appear in my Sponsor List with in my pageant contestant page in the official pageant program book and you will also receive a complimentary \$1000 in gifts certificate (web based merchandise certificate) and a complimentary pageant ticket as special "Thank You" gifts.

Thank you so very much for help! Please come and see me as I make good use of your sponsorship as a contestant in the 2004 Massachusetts Princess Pageant!

Sincerely,

Contestant's Signature and Printed Name

Parent/Guardian's Signature an Printed Name (if under 18 years of age)

Sponsor's Name _____

Phone Number (_____) _____

Amount Sponsored \$ _____

(Checks and Moneys Orders are accepted. Please make out to BPNE)

****ALL MONIES MUST BE RECEIVED BY September 4, 2004****

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Contestant Roommate Form

Name of Contestant _____
Pageant _____

Phone (____) _____
Email _____

I understand that I will be paired up with another pageant contestant during pageant weekend. I understand that by completing this form, it does necessarily mean that I will be paired up with my ideal roommate. However, it will increase my chances of this happening. If at any time, I am uncomfortable or have any issues with my roommate; I can inform the pageant director, assistant pageant director or chaperone for assistance.

Contestant's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

My ideal roommate will like this

MUSIC	_____	FOOD	_____
SHOW	_____	ARTIST	_____

My ideal roommate will keep her room _____

My ideal roommate will wake up at _____

My ideal roommate will go to sleep at _____

Three words that best describe my ideal roommate are:

Thank you for completing this form.

If any additional information is needed, we will contact you.