

# MODOC COUNTY FAIR QUEEN AND COURT APPLICATION

*A portion of your Appearance/Poise Score may be based on your application*

**INSTRUCTIONS:** This application must be completed in ink or with a computer and must be received at the Modoc District Fairgrounds Office no later than 4:00 p.m. on Friday, May 31, 2024. Applications that are received later will be considered ineligible. Please use additional pages if necessary. If you are currently still in high school, please attach a copy of your most recent report card.

Name \_\_\_\_\_

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

Physical Address \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Other \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_ Height \_\_\_\_\_

How long have you lived in Modoc County? \_\_\_\_\_

Education (last school attended) \_\_\_\_\_ Grade \_\_\_\_\_

What academic achievements and/or citizenship honors have you received?

\_\_\_\_\_

What school offices have you held? \_\_\_\_\_

\_\_\_\_\_

What special activities have you participated in (clubs, societies, churches, athletics, etc.)

\_\_\_\_\_

Plans to further your education \_\_\_\_\_

Courses of interest \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Reason(s) for entering \_\_\_\_\_

\_\_\_\_\_

Long term goals/ambitions \_\_\_\_\_

\_\_\_\_\_

Brief description of yourself \_\_\_\_\_

\_\_\_\_\_

Hobbies/Interests/Activities \_\_\_\_\_

\_\_\_\_\_

Ability or accomplishment that you are exceptionally proud of \_\_\_\_\_

\_\_\_\_\_

Sponsors \_\_\_\_\_

IN CASE OF EMERGENCY, NOTIFY \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

**RETURN APPLICATION AND APPLICATION AGREEMENT TO:**

**Modoc District Fair  
PO Box 26  
Cedarville, CA 96104  
(530) 279-2315**

# MODOC COUNTY FAIR QUEEN AND COURT APPLICATION AGREEMENT

I hereby grant permission to the Modoc County Fair Queen and Court Committee, Modoc District Fair and 34th DAA Board of Directors to verify any information contained on my application.

I hereby release the Modoc County Fair Queen and Court Committee, Modoc District Fair and 34th DAA Board of Directors from responsibility of injury or loss to persons or property, involving me or persons related to my appearance in the Pageant and, that such release shall include all accredited sponsors, commercial and private, or the Pageant and all officers, directors and groups of the Pageant and Modoc District Fair.

I certify that I have never been married, given birth to a child out of wedlock, nor am I pregnant. I agree that failure on my part to disclose this information to the Committee will disqualify me from participating in the Pageant. In the event of disqualification, prizes of any kind, which I may receive, will be returned to the Pageant. The Committee, Modoc District Fair and 34th DAA Board of Directors will be released from any and all liability resulting in my actions.

**I agree that I must divulge any information that I may have which will affect the outcome of the competition prior to the coronation dinner. If there is any dispute after the dinner, all judges' decisions are final and will be upheld without question.**

In the event that I receive a Modoc County Fair Queen or Princess title, I will complete the tenure of my reign in accordance with the Modoc County Fair Queen and Court Contract and Mandatory Events List schedule in the best interest of Modoc County and the Modoc District Fair. I will relinquish all claims relating to the title upon the naming of my successor.

*By my signature, I hereby certify that I have read the **Modoc County Fair Queen and Court Rules and Information** and I have also read and completely understand the **Modoc County Fair Queen and Court Contract**. I acknowledge that these regulations will prevail throughout the Modoc County Fair Queen and Court Pageant, activities and functions; and that said regulations pertain to all persons related to my appearance in the Contest, at the Modoc District Fair and required events.*

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**CONTESTANT SIGNATURE**

**DATE**

**APPROVED AND ATTESTED BY:**

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**SIGNATURE OF PARENT/GUARDIAN**

**DATE**