

Jefferson County Fair Queen Rules

1. You must be a resident of Jefferson County.
2. You must be 16 years old and not over 19 years old by July 1, 2008.
3. You must have written consent from a parent or guardian.
4. You cannot be a former Jefferson County Fair Queen.
5. You must be single, never married, and have no children. You must not marry, or become pregnant during your reign. If this should happen you will forfeit your title and scholarship.
6. The first place winner will serve as the Jefferson County Fair Queen for one year from the date of this contest. A first and second runner up will also be selected. You must be available to attend fair related events and some community and county events.
7. You must attend the PA State Fair Queen competition the week of January 21-24, 2009, at Hershey, PA. Failure to attend will result in the forfeiture of all scholarship money.
8. The winner will receive a \$500.00 educational scholarship to be used toward her college education. The first runner-up will receive a \$250.00 educational scholarship. The second runner-up will receive a \$100.00 educational scholarship. All monetary awards will be sent directly to the winner's college, technical school, or other institution of higher learning.
9. All contestants will compete in three categories: poise and personal appearance, question response, and speech presentation.
10. Each contestant must give a three to five minute speech on the following topic: "If you were to win this title, how would you use this experience to better yourself and the Jefferson County Fair?"

Complete this application and return to:

Angela Facchine Kelly

2288 Bond Street Ext.

Brockway, PA 15824

Phone (814) 265-2674 or e-mail to tfacchine@windstream.net

The Pageant will be held on Sunday, July 13 at the Jefferson County Fairgrounds at 2:30 p.m.

All contestants must be present by 1:30 p.m.

Jefferson County Fair Authority
Queen Application
Applications must be postmarked by June 15, 2008

Full name (first, middle, last): _____
Street Address: _____
City, State, and Zip: _____

Birth date: ____/____/____ Age: _____ Home Phone: _____

Name of Parents/Guardians:

Father: _____

Mother: _____

Grade this Fall, 2008 _____

Name of School attending this fall: _____

Please list school activities:

1. _____

2. _____

3. _____

(Use an additional page if more space is needed)

Please list achievements:

1. _____

2. _____

3. _____

(Use an additional page if more space is needed)

Signature of Parents/Guardians: _____

Mail application to:

Angela Facchine Kelly

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With questions, phone (814) 265-2674 or e-mail to tfacchine@windstream.net