

2010 Fort Bend County Fair Queen Contest  
Registration Form

Contestant Name: \_\_\_\_\_

Contestant Address: \_\_\_\_\_

Street Address

\_\_\_\_\_  
City    Zip Code

Home Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

*\*Two contact phone numbers MUST be provided*

Contestant Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

Social Security Number (last four digits only): \_\_\_\_\_

Contestant's Parents Names: \_\_\_\_\_

Parent's Phone (if different): \_\_\_\_\_

Name of Sponsoring Organization: \_\_\_\_\_

Name of Adult Rep. of Sponsoring Organization: \_\_\_\_\_

Sponsoring Organization Mailing Address:

Street Address

City    Zip Code

Sponsoring Organization Contact Phone Number:

BY SIGNING THIS DOCUMENT, THE UNDERSIGNED ACKNOWLEDGES THAT THE  
CONTESTANT, HER FAMILY, AND SPONSORING ORGANIZATION'S ADULT REPRESENTATIVE  
(IF APPLICABLE) HAVE EACH READ THE RULES OF THE FORT BEND COUNTY FAIR QUEEN  
CONTEST AND AGREE TO COMPLY WITH THE RULES OF THE CONTEST.

Contestant

-----Date-----

Contestant's Parent or Legal Guardian

-----Date-----

Sponsoring Organization's Group Representative (if applicable)

-----Date-----

Mail Application and Signed Rules of  
the Contest to:  
**Fort Bend County Fair**  
P.O. Box 428  
Rosenberg, Texas 77471