

Miss/Mr
Edwardsburg
Youth Scholarship Program



Miss/Mr. Teen Edwardsburg Representative Application and
Release Form

1. Contestant Information:

Name: _____ Age: _____

(List full name including middle initial, as you want it to appear on all Miss/Mr. Edwardsburg information)

Address: _____

(Street) (City/State) (Zip Code)

Cell Phone (_____) _____ Shirt Size _____ Pants Size _____

Primary Home Phone Number: (_____) _____ Date of Birth: _____

E-mail Address: Grade in school: (E-mail provides clear communication and is the Miss/ Mr. Edwardsburg Pageants main source of communication. This is not optional, an E-mail address must be provided to the Miss/ Mr. Edwardsburg Youth Scholarship Program Committee upon application and kept current within 7 days of any changes) **NOTE: We are asking that all contestants FRIEND the Chairperson or committee member in charge of monitoring FACEBOOK activity.**

2. Parent/Guardian Information:

Father's Name: _____

Telephone: _____ Cell Phone: _____

Address: _____

Mother's Name: _____

Telephone: _____ Cell Phone _____

Address: _____

OFFICIAL REGULATIONS AND APPLICATION REPRESENTATIONS

(Please Read Carefully Before Signing)

1. I am a female/male and will be at least 13-15 years of age as of December 31st of the current year (Copy of Certified Birth Certificate attached to application as proof). I do not or will not hold any other titles now or if I am chosen Miss/ Mr. Teen Edwardsburg or Court of Honor Member (unless approved PRIOR to participation by the EYSP chairperson). I will submit a CLEAR 5x7 Photograph with my application for all Miss/Mr. Edwardsburg Youth Program related newspaper press releases. (Photos NOT RETURNED if not taken home on our Program night!)

2. I am not now married or conceived a child, nor have I ever been married or ever conceived a child. If any of these conditions change I will notify the Miss/Mr. Edwardsburg Youth Scholarship Program Committee immediately, and I understand this will affect my eligibility. I will not live with my boyfriend during my reign. **Contestant Initials _____ Parent/Guardian Initials _____**

3. I have never been convicted of any criminal offenses, or Juvenile adjudications in juvenile court, nor am I in the process of any legal proceedings that could alter this statement (No applicant with misdemeanors, felonies, pending charges, or criminal records at any time prior to, during, or after the pageant will be allowed to complete or continue their reign in any capacity.). Some common examples are Drunk Driving, Reckless Driving, Minor in Possession of Alcohol (MIP), Minor in Consumption of Alcohol (MIC), Shoplifting, Malicious Destruction of Property, and Possession of Drugs. Any legal issues that may occur during the reigning year changes eligibility and must be brought in writing to the Miss/Mr. Edwardsburg Youth Scholarship Program Committee's attention immediately. No delays or exceptions. **Contestant Initials _____ Parent/Guardian Initials _____**

4. I understand that I must be of good character/reputation. The Miss/Mr. Edwardsburg Youth Scholarship Program Committee reserves the right to approve all entrants and to determine, without question, their eligibility to participate in the Miss/Mr. Edwardsburg Youth Scholarship Program or Blossomtime Festival activities. If I am chosen as Miss Teen Edwardsburg or a member of the Court of Honor, I understand that my behavior and actions at all times (not just when wearing the crown and sash) during my reign will affect my ability to continue in the roll of Miss/ Mr. Teen Edwardsburg (or member of the Court of Honor). **Contestant Initials _____ Parent/Guardian Initials _____**

5. I have an accumulated grade point average of 2.0 or higher on a 4.0 grading scale and I am maintaining my good standing and attendance. If this changes throughout the year, my participation will be reviewed and suspended if needed. If improvement is not accomplished quickly, I/We will accept any actions deemed necessary (including any consequences) to improve my academic status to pageant guideline levels. If I quit school for ANY reason I am NOT eligible to continue my reign or duties .

Contestant Initials _____ Parent/Guardian Initials _____

6. I presently maintain, and intend to continue to maintain permanent, year-round residence within the Edwardsburg area. Just attending Edwardsburg as school of choice is ACCEPTABLE, you must be an Edwardsburg School District student or home schooled Edwardsburg residents are eligible to participate. As of the age of 17 this rule is no longer acceptable to participate per Blossomtime guidelines as you will be competing for the Miss/Mr. Edwardsburg titles. **Contestant Int. _____ Parent/Guardian Ints. _____**

7. I agree that if I am selected Miss/Mr. Teen Edwardsburg (or as member of the Court of Honor) I will participate in all Miss/Mr. Edwardsburg and Blossomtime Festival, Inc. related activities including, but not limited to, float/group meeting(s), building of the float, and help in taking the float to parades. I will also abide by the rules and regulations of the Miss/Mr. Edwardsburg Youth Scholarship Program Committee and/or the Blossomtime Festival, Inc. activities.

Contestant Initials _____ Parent/Guardian Initials _____

8. If selected as Miss Teen Edwardsburg (or as a member of the Court of Honor), BOTH my parents and I, agree to the following:

a. I/We will always be kind, patient, and respectful to my fellow participants, chairpersons, committee members and volunteers, and we further agree to always work willingly with them in a positive manner without argument. No disrespect will be tolerated.

Contestant Initials _____ Parent/Guardian Initials _____

b. I/We also agree to discuss ANY problems or concerns with the EYSP Directors or the EYSP Chairperson ONLY not other people, participants or parents to cause undo stress or drama for the volunteers or contestants working hard to meet strict deadlines. This policy continues to be in effect for all court members placed with the opportunity to serve our community all year. Please help make this experience all it can be for ALL involved and set a positive example for our youth. THANK YOU! Contestant Initials_____ Parent/Guardian Initials_____

c. I understand that ALL rehearsals are CLOSED for the high school participants and PARENTS/SIBLINGS/FRIENDS are NOT allowed at DRESS REHEARSALS or BACKSTContestant Initials_____ Parent/Guardian Initials_____AGE (unless authorized by the EYSP Director/Blossomtime Chairperson.

Contestant Initials_____ Parent/Guardian Initials_____

d. NO Cell Phones allowed AT REHEARSALS OR EVENTS - If cell phone use is needed – contact the EYSP Chairperson or Director(s). (THIS IS A BLOSSOMTIME GUIDELINE THAT MUST BE FOLLOWED THROUGHOUT THE YEAR OF SERVICE.). Contestant Initials Parent/Guardian Initials

e. We agree to CHECK OUR E-MAILS DAILY INCLUDING BEFORE ALL REHEARSALS and respond to all E-mails within 24 hours of being sent to us. We understand that e-mail is the main source of communication with the Miss/Mr. Edwardsburg Committee Contestant Initials_____ Parent/Guardian Initials_____

f. Miss/ Mr. Teen Edwardsburg or any member of the Court Of Honor may not, from date of selection advertise, endorse or in any way infer support any commercial product or make personal appearances, as a representative without the written consent of the Miss/Mr. Edwardsburg Youth Scholarship Program Committee. (No Exceptions) Contestant Initials_____ Parent/Guardian Initials_____

g. Miss/ Mr. Teen Edwardsburg or any member of the Court of Honor (or anyone representing the court member i.e. parents, family, or friends etc.) may not at any time or under any circumstances, give written or verbal interviews with any media representative regarding any aspect of the Miss/Mr. Edwardsburg Youth Scholarship Program Committee, and/or Blossomtime activities. It is clearly understood that the Miss/Mr. Edwardsburg Youth Scholarship Program Committee Chairperson will handle all media communication. (No Exceptions) Contestant Initials_____ Parent/Guardian Initials_____

9. The Miss/Mr. Edwardsburg Youth Scholarship Program Committee reserves the right to revoke the crown and title if behavior and/or actions of Miss Teen Edwardsburg or a member of the Court of Honor (including anyone representing the court member, i.e. parents, family, or friends etc.) are deemed inappropriate by a majority vote of the committee members. If this action is deemed, it is understood the decision of the Miss/Mr. Edwardsburg Youth Scholarship Program Committee is a final decision and is not to be challenged by the titleholder or anyone representing the court member (i.e. parents, family, friends etc.). All crowns, sashes, and pins are property of the Miss/Mr. Edwardsburg Youth Scholarship Program, and will only be awarded to the court members upon the successful completion of their reign. It is also understood that all scholarships are to be awarded at the successful completion of my reign. Sponsored prizes are gifted according to the sponsors' discretion and can be revoked by the Miss/Mr. Edwardsburg Youth Scholarship Program Committee should disciplinary action occur. I/We accept and agree to all terms voluntarily. Contestant Initials_____ Parent/Guardian Initials_____

10. Good Moral Character includes: Honor, integrity, Accountability, and respect and are important virtues for all to maintain... Should the Miss/Mr. Edwardsburg Youth Scholarship Program Committee regretfully have to take any disciplinary action against me, either prior to or during my reign, BOTH my parents and I agree to accept this difficult decision with accountability, integrity, honor and respect, and agree not to slander or disrespect the Youth Program or the Chairperson, Committee Members, or volunteers at any time, to anyone in the public, school system, or Blossomtime Festival, Inc. Organization. Maintaining the honor and integrity of this program is of utmost importance to all involved with this EYSP activity. And any disciplinary action put forth is done so with careful consideration, and in keeping with the EYSP'S future success in mind. The Miss/Mr. Edwardsburg Youth Scholarship Program and Blossomtime Festival, Inc. has the difficult responsibility of trying to be fair to everyone that has followed the rules, both in the past, the present, and well into the future.

Contestant Initials_____ Parent/Guardian Initials_____

11. The Miss/Mr. Edwardsburg Youth Scholarship Program Committee will not be responsible for providing transportation too or from any event at anytime. It is the responsibility of the participant and the parent/guardian to arrange for all transportation for their Court Member with a signed authorization releasing any liability. Remember: it is also appropriate to share the financial burden if a Court Member needs to share a ride with anyone to a meeting or an event.

Contestant Initials _____ **Parent/Guardian Initials** _____

12. Any representation or untrue statement by any contestant, Miss/Mr. Teen, or Court Member, or failure to comply with any of the terms, provisions or restrictions of this agreement on your part to be performed, shall be at the option of the Miss/Mr. Edwardsburg Youth Scholarship Program Committee, resulting in the loss or disqualification of the contestant, Miss/ Mr. Teen, or Court Member, the loss of the title, and the return of any and all prizes granted.

Contestant Initials _____ **Parent/Guardian Initials** _____

13. Should any claim against the Miss/Mr. Edwardsburg Youth Scholarship Program Committee or its volunteers arise, such claim or defending such action through the counsel of its own choice through the contestant, Miss/Mr. Teen, Court Member's counsel shall be at the cost of the contestant, Miss/Mr. Teen, or Court Member's.

Contestant Initials _____ **Parent/Guardian Initials** _____

14. This agreement is in effect from the date you sign this application to the pageant date the following year, providing the contestant becomes Miss/Mr. Teen or a member of the Court of Honor.

Contestant Initials _____ **Parent/Guardian Initials** _____

15. If you are chosen as Miss Teen Edwardsburg or the Court of Honor, The Miss/Mr. Edwardsburg Youth Scholarship Program Committee has the right to use and authorize the use of the name, photographs, or other likeness, and biographical and publicity material. **Contestant Initials** _____ **Parent/Guardian Initials** _____

16. The Miss/Mr. Edwardsburg Youth Scholarship Program has a strict no tolerance policy for bold color streaks in the hair, multiple piercing, facial piercing and tattoos at any time from the date you sign this application to the annual program date of the following year providing the contestant becomes a court member. Only one pair of earrings (Ladies) is allowed at all times. .If you already have multiple piercing or facial piercing they must removed and remain removed at all times during your entire reign. Existing tattoos must be covered up at all times. Furthermore you may not receive more piercing or tattoos from the date you sign this application to the pageant date of the following year providing the contestant becomes a court member.

Contestant Initials _____ **Parent/Guardian Initials** _____

17. The Miss Edwardsburg Youth Scholarship Program has a strict no tolerance policy for smoking, drugs and alcohol at anytime from application date to completion of reign providing the contestant becomes a court member. These are illegal and simply will not be tolerated at any time. **Contestant Initials** _____ **Parent/Guardian Initials** _____

18. No additional Props to be used by any contestant during the EYSP unless the Pageant Director gives prior approval for all contestants to have the same opportunity (due to fairness in judging) also all contestants cannot approach the MC's unless the EYSP Director/Chairperson gives prior approval as well. The Judges will be notified of any variations from the authorized Pageant Script. **Contestant Initials** _____ **Parent/Guardian Initials** _____

CONSENT/RELEASE AND HOLD HARMLESS AGREEMENT

By their signatures below, applicant and her parent/guardian certify: (1) they have read, understand and agree with the rules and regulations as set forth in numbers 1 through 18 above; (2) the applicant meets the requirements and will comply with the regulations stated; (3) they understand that untrue statements, misrepresentations- (whether intentional or unintentional) or failure to comply may result in applicants disqualification and/or forfeiture of any Miss Teen Edwardsburg (or the Court of the Honor) title; (4) we hereby release to the Miss/Mr. Edwardsburg Youth Scholarship Program Committee the applicant's records as a student at any high school attended; (5) We understand and agree to the fact that the Miss/Mr. Edwardsburg Youth Scholarship Program will be conducting background checks by checking public records to verify that no charges were, or are, filed or pending against the applicant at any time prior to, during, or after, the Miss/Mr. Edwardsburg and Blossomtime activities. We understand and agree that if any charges are found at any time, all duties will be suspended; all titles, crowns, prized, scholarships and awards will be immediately revoked, (and must be returned to the Miss/Mr. Edwardsburg Youth Scholarship Program Committee within (7) days after notification from the Miss/Mr. Edwardsburg Youth Scholarship Program Committee). (6) We do hereby release, unconditionally and forever, any claim against the Miss/Mr. Edwardsburg Youth Scholarship Program Committee. its directors, members or sponsors and agree to hold them harmless as to any claim arising out of any and all participation in the Miss/Mr. Edwardsburg Youth and Scholarship Program or Blossomtime Festival, Inc. activities or their related activities. (7) If I violate this consent/release and hold harmless this agreement, the committee, volunteers in any way and against any and all claims and demands, causes of action, losses, liabilities, cost, damages and expenses including but not limited to reasonable legal and attorney fees and expenses, incurred by the Miss/Mr. Edwardsburg Youth Scholarship Program Committee, and volunteers which arise out of, or are related or incidental to the Miss/Mr. Edwardsburg Youth Scholarship Program Committee activities.

Signature of Applicant: _____ Date: _____

Signature of Parents and/or Guardian(s):

_____ Date: _____

(Father/Mother/Guardian) (Circle One)

_____ Date: _____

(Father/Mother/Guardian) (Circle One)