



2023 MJSS TETON COUNTY FAIR & RODEO ROYALTY ENTRY FORM
Applications due by Monday May 1st @6:30 PM, 2023

OFFICIAL TITLE COMPETING FOR:		
NAME:		
DATE OF BIRTH:	AGE (as of January 1st):	
	AGE (as of November 1st):	
ADDRESS (Mailing):		
CITY:	STATE:	ZIP:
EMAIL:		
Home Phone:	Cell:	Work Phone:
Number of Years Teton County Resident:		
PARENTS:		
EMAIL:		
ADDRESS:	PHONE:	

EDUCATION:

Elementary School:

High School:

College:

Special Training:

Occupation if applicable:

CLUB MEMBERSHIPS:

HONORS & AWARDS:

RODEO & HORSESHOW ACTIVITIES:

At what age did you start riding?

HOBBIES & INTERESTS:

WHAT ARE YOUR PLANS FOR THE FUTURE?

WHY I WANT TO BE MISS TETON CO. FAIR & RODEO ROYALTY:

PLEASE ATTACH ADDITIONAL PAGES IF NECESSARY



RELEASE WAIVER OF LIABILITY

By entering, you agree to the following: "I/we release and hold harmless Teton County, Teton County Commissioners, Teton County Fair Board, Town of Jackson, Pageant Officials and Judges from any liability for damages or injuries sustained while on the premises of the Teton County Fair Grounds, by agents, representatives, employees or myself or any organization or association of any invites thereof. I/we accept liability for any damages or injuries caused due to negligence or from any cause arising during events."

I/we also agree to all rules as set forth in the "Miss Teton County Fair & Rodeo Official Rulebook". If I/we cannot or do not follow any of the set rules, I/we understand that awarded title will be revoked immediately. I/we also understand and agree to this commitment, knowing it will be for one full year from the pageant date. If I/we cannot or do not fulfill said duties as part of the Miss Teton County Fair & Rodeo Royalty, I/we understand that awarded title and all awards will be revoked immediately.

Applicant Signature

Date

Parent Signature (parent must sign if under 18)

Date

TETON COUNTY FAIR & RODEO ROYALTY SPONSORS

1. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
2. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
3. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
4. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
5. SPONSOR NAME _____
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AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
6. SPONSOR NAME _____
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7. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
8. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
9. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____
10. SPONSOR NAME _____
MAILING ADDRESS _____
AMOUNT OF DONATION \$ _____ CASH _____ CHECK# _____

PLEASE RETURN COMPLETED FORM AND MONEY WITH YOUR ENTRY.

Minor Photo Release

I hereby authorize Teton County Fair, hereafter referred to as "Company," to publish photographs taken of myself and/or the minor child or children listed below, and our names and likenesses, for use in the 2023 Teton County Fair print, online and video-based marketing materials, as well as other Company publications.

I hereby release and hold harmless Teton County from any reasonable expectation of privacy or confidentiality for myself and for the minor child and children listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize Teton County Fair to use their likenesses and names.

I further acknowledge that participation is voluntary and that neither I, the minor child, or minor children will receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Company publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release Teton County, its contractors, its employees and any third parties involved in the creation or publication of Company publications, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

Authorization:

Printed Name: _____

Signature: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Relationship to Children: _____

Names and Ages of Minor Children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____