

Little Miss Broome County

Jr. Miss Broome
County



Miss Broome
County

____/____/____

Age _____

Name of Contestant

Date of Birth

Address
Zip

Street

City

State

() _____ - _____
Home Phone Number

Name of Parent/Guardian

Hobbies and Interests -

Three Adjectives to describe Contestant:

Future Plans/Goals:

Contestants Favorite Event/ Memory at the Broome County Fair :

Signature of Contestant

Date

____/____/____

Signature of Parent/Guardian

Date

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