

# Ms. Lake Havasu City

## Pageant and Dance 2019

Dear Friends

Are you a special lady age of 45 or over, who is a resident of the Lake Havasu Community? Do you desire to share your experience, knowledge and talent with the community? Or, do you have a very special friend or relative who fits this description?

***You or she could be Ms. Lake Havasu City! Anyone 45 or over may enter.***

This community event is not a popularity contest, beauty pageant, or celebrity sweepstakes. It is, however, a chance for women to receive the recognition and honor they deserve.

Ms. Lake Havasu City and runner up will be crowned on Saturday, September 7, 2019. Contestants will be judged on how they share their talent, hobby or other interest, philosophy of life responses and general poise and presentation.

**The winning candidate will again be able to name a local charity of her choice to be the recipient of \$1,000.**

All applications will be reviewed by the Ms. Lake Havasu City Pageant Committee. Contestants will be selected to participate in the pageant based upon qualifications.

***Anyone may make a nomination***

No matter what your age, you can nominate your favorite lady. Just fill out the entry form as completely as you can. Then have that special friend or relative sign the statement at the end of the entry.

A photo must be included. Letters of recommendation would be very helpful, but are not required. Mail completed entry form, photo, and any other information to:

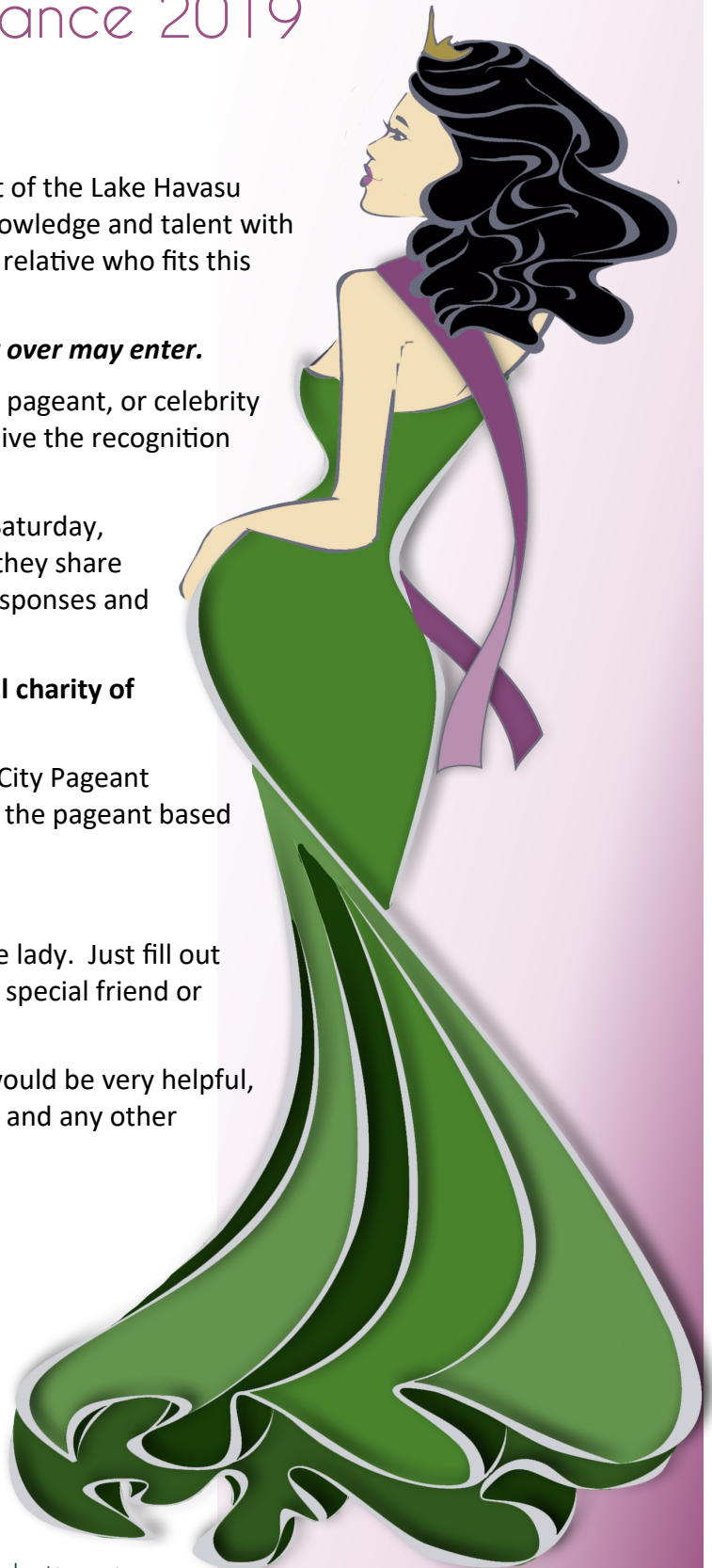
Havasu Community Health Foundation  
94 Acoma Blvd. S., Suite 101  
Lake Havasu City, Arizona 86403

**Entry forms must be postmarked no later than  
July 31, 2019.**

Questions can be directed to the appropriate committee representative by calling 453-8190.



Havasu Community Health Foundation is a  
501(C)3 public charity Tax ID 20-1839858



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### Rules

1. Persons nominated must have reached 45 years of age by September 7, 2019.
2. The entrant must acknowledge nomination by signing the release form at the end of the application/entry form.
3. Application, photo, and other information **cannot** be returned.
4. This entry is valid for 2019 only.
5. Please be sure that all pertinent information is included with this entry. Any details will help the judges in making their final decision. After the entry is received, the judges will be unable to accept any new information at a later date, so make certain you have not omitted any information.
6. Nominations must be postmarked no later than July 31, 2019. The final contestants will be notified by phone.
7. The winner will not be eligible to participate in future pageants as a contestant.
8. The decisions of the judges are final.
9. I hereby agree that I, my heirs, legal representatives, and assigns will not make a claim against and will hold harmless the Havasu Community Health Foundation, The London Bridge Resort, or any of their agents and employees for injury or damage resulting from the negligence or other acts, however caused, by any employee, agent or contractor of the Ms. Lake Havasu City Pageant or as a result of my participation in the Pageant activity based in Lake Havasu City, Arizona.

Mail or deliver completed entry form, and photo, plus any other information to:

Havasu Community Health Foundation  
94 Acoma Blvd. S., Suite 101  
Lake Havasu City, Arizona 86403

Packet must be delivered to the HCHF office or postmarked no later than  
July 31, 2019

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## Application

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Age \_\_\_\_\_ Birthdate: \_\_\_\_\_

Number of Children \_\_\_\_\_ Number of Grandchildren \_\_\_\_\_

# Years Residing in Havasu \_\_\_\_\_ Pets \_\_\_\_\_

How will you share your talent, hobby or interest (No longer than 3 min) \_\_\_\_\_

\_\_\_\_\_

Use Back If Necessary

Other hobbies and interests \_\_\_\_\_

\_\_\_\_\_

Community involvement/Volunteer activities \_\_\_\_\_

\_\_\_\_\_

Career \_\_\_\_\_

Membership in clubs & organizations \_\_\_\_\_

\_\_\_\_\_

Awards, achievements or special honors \_\_\_\_\_

\_\_\_\_\_

**If I am the winner, I would like \$1,000 to be donated to the following local charity:**

(HCHF, one of our partner organizations or any other charity.)

Please include a typed personal biography of no more than 500 words on a separate sheet and a recent photo of yourself. This biography and photo will be used for media purposes. Please include enough information to be read in 2 segments of the program. **In the final paragraph of your biography, please state your reason for selecting your named local charity.**

**I have read the rules and regulations of the Ms. Lake Havasu City Pageant. My signature certifies that I meet the eligibility rules and have an understanding of the regulations. I agree to abide by all contest rules and regulations to the best of my ability.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date