



FARMINGTON AMBASSADOR APPLICATION

Name: _____
(As you want it to appear on all publications)

Address: _____

Cell Phone: _____ **Age:** _____ **Grade:** _____
(2016-2017 School Year)

School: _____

Candidates email (if applicable) _____

**CANDIDATES SHOULD BE PREPARED TO HAVE THEIR PICTURE TAKEN AT THE CANDIDATE MEETING MARCH 21st, 2017. PLEASE WEAR A DARK SOLID COLOR TOP.
** THIS WILL BE USED FOR PROMOTION OF THE PROGRAM****

Adult Contact Name: _____

Phone: (Cell) _____ (Home) _____

E-mail: _____

WAIVER FOR PARTICIPATION BY CANDIDATE 18 YEARS OF AGE OR OLDER

In consideration of your accepting my entry, I hereby, for myself, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I may have against the City of Farmington, CEEF and the Miss Farmington Committee and its representatives, successors and assigns for any and all injuries suffered by myself at any activity sponsored by these groups or participated in.

Candidate Applicant Signature: _____

WAIVER FOR PARTICIPATION BY PARENT – CANDIDATE UNDER AGE 18

In consideration of your accepting my child's entry, I hereby, for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I or my child may have against the City of Farmington, CEEF and the Miss Farmington Committee and its representatives, successors and assigns for any and all injuries suffered by myself or my child at any activity sponsored by these groups or participated in.

Parent or Guardian Signature: _____

Please submit application by email to chair@farmingtonroyalty.com. You will receive an acknowledgement e-mail within 24 hours of the submittal.

DEADLINE: March 12th, 2017



FARMINGTON AMBASSADOR BIOGRAPHY INFORMATION

Please limit information to two pages.

The information furnished on this form will be used as biographical information during the question portion of the Meet the Candidate and the Coronation as well as an introduction to the Selection Committee.

Name: _____ **Grade:** _____
(As you want it to appear on all publications)

School: _____ **G.P.A (Miss Only)** _____

Parent name(s): _____

Why would you like to be a part of the Farmington Ambassador Program:

What do you like best about Farmington:

What is your favorite event during the Dew Days festival and why?

Favorite School Classes:

What Activities/Sports/Hobbies do you participate in:

Future and or current educational plans/goals(Miss only):

When I grow up I want to be(Career or Long Term Goals):

WAIVER FOR USE OF INFORMATION

I hereby give permission for the use of the above information about me/my child and my/her photograph in publications relating to the Farmington Royal Ambassador Program.

Candidate (if age 18 or over) or Parent/Guardian Signature: _____