



## Miss NARC & SP Queen Application

Date: \_\_\_\_\_

Contestant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age as of 1/1/2017: \_\_\_\_\_

District: \_\_\_\_\_ Club: \_\_\_\_\_

Years as a Member of NARC & SP: \_\_\_\_\_

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(You may use a separate sheet of paper if needed for the following questions)

1. List all Club, District, and National Functions or activities you have participated in during the past 12 months.

2. Please tell us why you believe you are a qualified candidate for Miss NARC & SP.

3. List any Royalty Titles you have held within your Club or District, if any.

4. Additional comments or anything you would like to share about yourself.

\*\*\*Please read the rules provided by The NARC & Sp. By signing this application, you are stating that you understand the duties of the office of National Queen and agree to comply with the requirements should you be elected to that office.

Signature's Required:

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Club President: \_\_\_\_\_ Date: \_\_\_\_\_

District President: \_\_\_\_\_ Date: \_\_\_\_\_

District Queen's Committee Chair: \_\_\_\_\_ Date: \_\_\_\_\_

National Queen's Committee Chair : \_\_\_\_\_ Date: \_\_\_\_\_

Parents Signature if under the age of 18: \_\_\_\_\_