

THE JACKSONVILLE  
SCHOLARSHIP FOUNDATION, INC.

MISS

*Jacksonville*

MISS

*& River City*



Ruth Sidbury, Foundation President  
2420 Tebassa Road, Jacksonville, FL 32216

For information or questions? Call: (904) 733-7042

SCHOLARSHIP PAGEANT  
[www.JacksonvilleCrowns.com](http://www.JacksonvilleCrowns.com)

## FOR MISS & OUTSTANDING TEEN CONTESTANTS

### Confirmation of Knowledge Regarding Rehearsals, Tickets & Ad Sales and Sponsorships

The Jacksonville Scholarship Foundation, Inc. is a non-profit corporation created specifically for the purpose of conducting women's scholarship pageants and awarding scholarship funds to the winners. Our principal sources of funding are through sponsors, donations, advertising for the pageant program book, and ticket sales. Your help will be expected and appreciated, and is necessary to enable us to continue our tradition of having the best pageants in the State of Florida.

Contestants' attendance at all rehearsals is mandatory, and contestants must be on time. If you fail to comply with the attendance requirements, you will be disqualified and no ticket sales, advertising, or sponsorship money will be returned.

Ticket sales by contestants are requested. You will be given tickets to sell at a set price. To receive these tickets you must assume responsibility for turning in all monies and/or tickets not sold by the **deadline of January 17, 2010**. Failure to turn in all tickets or the monies from the sale of tickets by the deadline will result in your disqualification to compete and no ticket sales, advertisement, or sponsorship money will be refunded. The sponsor will still be recognized by the Emcee on stage.

Contestants are requested to find sponsors. Once you have turned in your sponsor information, making the official commitment to be in the pageant, you can then make your talent selection and request a contestant line-up number. This selection must be made in writing. Once the sponsorship money is received, the sponsorship cannot be refunded unless there is an illness or accident that would prevent you from competing. A doctor's written statement would have to be provided in such a case.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Contestant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature  
Required for contestants under 18 YOA