

# Summer's End Festival

## Queen

*Contestant Name:* \_\_\_\_\_

*Age as of 8/25/23:* \_\_\_\_\_ *Grade:* \_\_\_\_\_ *Phone #:* \_\_\_\_\_

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

*Name of Parents:* \_\_\_\_\_

*Sports & Activities:* \_\_\_\_\_  
\_\_\_\_\_

*Hobbies & Talents:* \_\_\_\_\_  
\_\_\_\_\_

*Future Plans:* \_\_\_\_\_

**PLEASE RETURN TO THE ROSSVILLE TOWN HALL OR MAIL TO:**

**RBA at P.O. BOX 224 ROSSVILLE, IN 46065**

**BY JULY 17<sup>TH</sup>.**

**EMAIL QUESTIONS TO: [rossville@geetel.net](mailto:rossville@geetel.net) or CALL 765-379-2645**

**This contest is based on monetary donations. Each individual will be responsible for collecting their own donations.**