



2014 MISS AMERICA BADGE ORDER FORM

Due: JULY 28TH 2013 VIA EMAIL -OR-
AUGUST 20TH 2013

Cost: \$40.00 PER BADGE by JULY 28TH
\$55.00 PER BADGE if request received after
JULY 28TH but before AUGUST 20TH

Payment: ONLY CREDIT CARDS ARE ACCEPTED

Enter Credit Card Information below and Email form to: BADGEREQUEST@MISSIOWA.COM

Photo for Badge:
Email id face photo in jpg format to: BADGEREQUEST@MISSIOWA.COM

****If you received a badge for Miss America 2013 or 2012, your picture will be on file and it is not necessary to submit a photo. Please be sure to indicate this below.**

BADGE TYPE

- A. State Board or Committee (All State Board or Committee members, their spouses and children 21 years & older)
- B. Local Board or Committee (All Local Committee members, their spouses and children 21 years & older)
- C. Guest Badge (Miss Iowa Sponsors, their guests, and former "Miss" National Contestants, their spouses and children 21 years & older)
- D. Special Guest - State and Local Contestants currently eligible to compete in the Miss America system and the children of Iowa and local volunteers between the ages of 6 and 20 years old.
- E. Parents, Family & Friends - Parents, family members and friends of the National Contestant only.

Organizational volunteers - please select the State or Local Committee Option - NOT the Parents, Family and Friends Form.

Miss America Badges allow access to: Open Rehearsals (camera not permitted), the Miss America Trade Show and Contestant Visitation after preliminary and final competition nights. Badges with photo id can be picked up at the Miss America Registration Desk located in Boardwalk Hall in Atlantic City.

Number	Name of Badge Holder	BADGE TYPE Select A through E from box above	Photo on File	Relationship to Nicole	
1					
2					
3					
4					
5					
6					

BY JULY 28th Total Amount Owed: Number of Badges _____ X \$40 = \$ _____

BY AUGUST 20th Total Amount Owed: Number of Badges _____ X \$55 = \$ _____

I authorize my credit card to be charged for badges ordered above. Badges are non-refundable. Please use one credit card per form.

CREDIT CARD PAYMENT INFORMATION: (No Post Office Boxes please)

Contact Name: _____

Street: _____

City _____ State: _____ Zip: _____

Daytime Telephone: (_____) _____ Email Address: _____

Visa MasterCard Amex Credit Card Number: _____

Exp Date: _____ 3 Digit Security Code: _____