

Miss Iowa Scholarship Program

Miss Iowa / Miss Iowa's Teen Contestant Acknowledgment Form

Name: _____

As a contestant/delegate in the Miss Iowa Scholarship Program (Miss or Teen division), I acknowledge receipt of the information regarding the timing of talent/HerStory performances, and I agree that I have had ample opportunity to ask any questions that I may have pertaining to this information and the policy regarding timing.

As a contestant/delegate in the Miss Iowa Scholarship Program (Miss or Teen division), I acknowledge receipt of the information regarding the award of scholarships, and I agree that I have had ample opportunity to ask any questions that I may have pertaining to this information and the policy regarding scholarships.

Runner-up Information

In the event Miss Iowa / Miss Iowa's Teen must be replaced, and I am an ascending runner-up, I understand that as said ascending runner-up, I will not receive the scholarships and awards equal to those won by the original titleholder.

Contestant's signature

Date

Parent or Guardian's Signature (If Contestant is under 18)

Date

Signature on this document indicates that you have read and discussed the same with Contestant.