

Franklin/Southampton County Fair

2021 Tiny Tots

Saturday, August 14th

9:00 a.m.

Chairperson:

Jennifer Graham (757) 377-8805

Rules:

1. Tiny Tots is open to all residents of age in Franklin, Southampton County and adjacent counties.
2. Only the first 50 eligible contestants will be able to participate.
3. Contestants must be pre-registered by July 5, 2021 this includes a completed registration form, payment for entry fee \$10.00, and a completed photo release form.
4. Contestants must be at least 6 months of age and younger than 36 months of age by August 14, 2021.
5. If a child does not walk, he/she may be strolled or have one person carry them.
6. All participants will receive a certificate.
7. There will be a first place and runner-up winner in each class.
8. Each contestant should wear an outfit of their choosing.
9. Please arrive 15 minutes early (8:45 a.m.)
10. Photogenic award: submit a 5x7 photo. Pictures will be displayed the week of the Fair.
11. Category Guidelines as follows:

Girls

- 6-8 months
- 9-12 months
- 13-18 months
- 19-24 months
- 25-36 months

Boys

- 6-8 months
- 9-12 months
- 13-18 months
- 19-24 months
- 25-36 months

Photo Release Form

Franklin/Southampton County Fair
25374 New Market Road
Courtland, VA. 23837

Permission to use photograph

Tiny Tots 2021

I grant Franklin/Southampton County Fair, and representatives the right to take photographs of me and my property in connection with the above-identified subject. I authorize Franklin/Southampton County Fair, its assigns and transferees to copyright, use and publish the same in print or electronically.

I agree that Franklin/Southampton County Fair may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising and Web content.

I have read and understand the above:

Signed by parent or guardian

Print name of contestant

Date

2021 Tiny Tots

Contestant # _____ (will be given the day of the pageant)

_____ (name)

Is the son/daughter of _____
(parents).

He/she is _____ (age). He/she has _____ hair and _____ eyes. His /her Favorite

Person is _____ and his/her favorite food

is _____.

Date of Birth: _____ Age: (as of Aug. 14th) _____

Address: _____

Phone: _____