



**“14th ANNUAL MISS PAULDING COUNTY BEAUTY PAGEANT” AND  
PAULDING’S TALENTED MISS & TEEN MISS COMPETITION 2009**

We hope that you will be a participant in this year’s pageant & talent competition. Proceeds go to benefit “The American Cancer Society”, “The National Eating Disorders Association” ([www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)) & “The Puckett Lake Community Youth Outreach”. You do not have to be a resident of Paulding County to enter.

- DATE:** Saturday, March 21, 2009  
**LOCATION:** The Dallas Theatre  
 208 Main Street, Dallas, GA 30132  
 (Located in downtown Dallas, across from old courthouse)  
**ADMISSION:** \$3.00 – Adults (One parent admitted free with contestant)  
 \$2.00 – Students (Children 5 & under will be admitted free)  
**BEAUTY ENTRY FEE:** \$75 for early registration received no later than March 13, 2009;  
 \$85 for registration after March 13, 2009 or at the door (Cash only at door)  
**TALENT ENTRY FEE:** \$45 (Note: talent competition is totally separate from beauty pageant)

**Beauty Division – Girls:**

- 0-12 Mos. – Baby Miss Paulding – 10:00 AM
- 13-23 Mos. – Toddler Miss Paulding – 10:30 AM
- 2 Years – Wee Miss Paulding – 11:00 AM
- 3-4 Years – Tiny Miss Paulding – 11:30 AM
- 5-6 Years – Little Miss Paulding – 1:00 PM
- 7-9 Years – Young Miss Paulding – 1:30 PM
- 10-12 Years – Pre-Teen Miss Paulding – 2:00 PM
- 13-15 Years – Teen Miss Paulding – 3:00 PM
- 16-24 Years – Miss Paulding County – 3:30 PM

\*\*Pageant officials reserve the right to combine a division if there are not enough participants in the division.

**Talent Competition:**

- 8-12 Years – Talented Teen Miss Paulding 2009 4:00 P.M.
- 13-up Years – Talented Miss Paulding 2009 4:30 P.M.
- \*\*\*\*BRING MUSIC ON CD OR CASSETTE CUED TO YOUR MUSIC\*\*\*\*
- \*\*\*\*TALENTED TIME LIMIT.....3 MINUTES\*\*\*\*

**Awards:** Queen in each division will receive a crown, trophy, custom made banner and flowers. Runners-up will receive trophy and flowers. Participation Trophies will be awarded through Pre-Teen Miss Division. Plaque will be awarded for Photogenic winner in each age division. (Make sure to bring a photo the day of the pageant.) Trophies will be presented for Prettiest Hair, Prettiest Smile, Prettiest Dress and Prettiest Eyes in each age division. The **SWEETHEART AWARD** will be presented to the contestant that raises the most money (must be monetary) to be donated to “The American Cancer Society”, “The National Eating Disorders Association”, and “The Puckett Lake Community Youth Outreach”. This special contestant will receive a 3 foot trophy & custom made banner. The Volunteer Service Award winner will receive \$100 Savings Bond and custom made banner. Talent Winners will receive trophy, crown, and custom made banner. Queens, Sweetheart Titleholder, Volunteer Service Winner, and Talent Winners will ride in the Dallas Christmas Parade in December and participate in other community service activities during the year.

Make Entry Fee Checks Payable to: RENEE BUCHANAN  
 Make “Sweetheart Award Donations” to either “The American Cancer Society”, “The National Eating Disorders Association”, or “The Puckett Lake Community Youth Outreach”.

Mail Entry Forms & Fees to: RENEE BUCHANAN  
 C/O MISS PAULDING COUNTY BEAUTY  
 PAGEANT  
 P.O. Box 2551  
 Powder Springs, GA 30127  
 (770) 845-8769  
[www.misspauldingcounty.org](http://www.misspauldingcounty.org)

## ENTRY FORMS

**DIVISION:** \_\_\_\_\_ **NUMBER:** \_\_\_\_\_  
**(DO NOT FILL IN)**

**Beauty** \_\_\_\_\_ **Sweetheart Award** \_\_\_\_\_ **Volunteer Service Award** \_\_\_\_\_  
**Talent Competition** \_\_\_\_\_

Name: \_\_\_\_\_ Age \_\_\_\_\_ Birthday: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

School: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair color: \_\_\_\_\_

Special Interests/Honors: \_\_\_\_\_

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Sponsored By: \_\_\_\_\_

Talent participants, please list type of talent (sing, dance, etc.) and title of your music:

\*\*\*Results of individual score will not be made available.

I hereby agree to abide by the pageant rules and to conduct myself in a sportsmanship like manner. I hereby release "Miss Paulding County Beauty Pageant", The Dallas Theatre and any other person or persons from liability for my personal items during the pageant.

Contestants/Parents Signature: \_\_\_\_\_

Date: \_\_\_\_\_





Dear \_\_\_\_\_,

I \_\_\_\_\_ will be a participant in the 2009 "14th Annual Miss Paulding County Beauty Pageant" to be held March 21 at The Dallas Theatre.

This pageant is held each year to raise money for "The American Cancer Society", "The National Eating Disorders Association" and "The Puckett Lake Community Youth Outreach".

One title that will be awarded is the 2009 "Miss Sweetheart." This contestant will be the girl that raises the most money to be donated to the above mentioned charities.

I would like to ask for your donation to help me win this prestigious title.

Sincerely,