

6th Annual
Miss Bayou Voice for Autism Pageant

Proceeds to benefit Autism Society Bayou Chapter

Date: May 18, 2019
Time: 12:00 PM & 4:00 PM
Place: Morgan City Jr High
911 Marguerite Street
Morgan City, Louisiana

Director: Crystal Carmichael
PO Box 551
Amelia, LA 70340
bayouautism@yahoo.com
bayouvoiceforautism2014@yahoo.com

Entry Fees: Baby thru Deb \$50
Early Entry Deadline: May 13, 2019
Fee Includes Photogenic and all side awards.
Dress Code: Baby thru Deb - Sunday Best (Natural, NO Hair Pieces, Light Makeup)
Junior thru Ms. - Formal
Interview: Junior thru Ms. - Interview at 10:00 AM.
Interview Dress Code: Sunday Best
Self Intro: Teen thru Ms.: Jingle, Name and Contestant Number
Junior - Basic self intro only (Name and Contestant Number)

Jr. thru Ms. \$60
Door Entry: \$10
Baby thru Deb Overall: \$5

Divisions

0-11 Months Baby Miss 12-23 Months Toddler Miss 2 Years T'nicity Miss
3 Years Tiny Miss 4-5 Petite Miss 6-7 Little Miss
8-10 Deb Miss 11-13 Junior Miss 14-16 Teen Miss
17-23 Miss (Single) Ms... Any age Married, Separated, or Divorced
Doors open at 11 AM. Baby Miss will start promptly at 12 AM and run thru to Deb Miss.
Evening Pageant will start promptly at 4 PM.

Queens will receive a beautiful custom crown, monogrammed banner, and a nice gift.
Alternates will receive a certificate/plaque.
All side awards will receive a certificate. High Point Award.
Photogenic will receive a certificate and photo frame.
Overall Fashion and Beauty option for Baby thru Deb \$5 for both.
Jr. Miss, Miss, Teen Miss, and Ms. will have a limited contract.
Review of contract will take place after pageant with new Royalty.

All New Queens will be required to attend Autism Society Bayou's 12th Annual 5k Run/Walk in the spring of 2020. All others are strongly encouraged to attend this amazing event to obtain the full experience of the reason of this pageant and learn the many reasons we stand to RAISE AWARENESS.

Please mail registration form and payment to Autism Society Bayou, PO Box 551, Amelia, LA 70340

Any questions, please contact the Director or Autism Society Bayou at bayouautism@yahoo.com



Contestant Info

Division: _____ **Photo:** ___ Yes or ___ No _____

Name: _____ **Age:** _____ **D.O.B.:** _____

Parents: _____ **Sponsor:** _____

Hair Color: _____ **Eye Color:** _____ **Fav.**

Food: _____

Fav. Person: _____ **Fav. Movie:** _____ **Fav. Color:** _____

Grade: _____ **School:** _____

Clubs/Organizations: _____

Hobbies: _____

Ambitions: _____

.....

I understand that Morgan City Jr High, Pageant Directors, Autism Society Bayou and Volunteers are NOT responsible for personal injury, nor lost stolen and/or damaged property. Bad sportsmanship will NOT be tolerated, you will be asked to leave without a refund! All judges' decisions are final! **Score sheets can be viewed the day of for a \$2 donation.** No refunds or transfers will be given. Please make check to Autism Society Bayou. Thank you for your support.

Parent/Guardian's Signature: _____ **Date:** _____

Address: _____ **City:** _____ **Zip:** _____

Email: _____ **Phone:** _____

.....

For Office Use Only

Division: _____ **Paid:** _____ **Check Number:** _____

Photogenic: ___ YES ___ NO ___ **Overall:** _____ **Overall Paid:** _____

Score Sheet Viewing Paid: _____