Brigden Fair

Thanksgiving Weekend

www.brigdenfair.ca

Mini Ambassador of Brigden Fair Competition – Application Form

Name: _____

Age: _____ **Date of Birth:** _____

Address (911):_____

Email Address: _____

Phone Number: _____

School Attending: _____

Grade (as of September 2026): _____

Biography (Will be read at the contest. Please write in third person):_____

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Where Did You Hear About the Competition?_____

☐ **I am the legal guardian of this person and consent and authorize for MAS to use photographs and video of this person or in which they are included for advertising purposes including posting on social media**

Parent's Signature: _____