

**SEA PRINCESS APPLICATION – 2009 MAINE LOBSTER FESTIVAL**

Please type or print all the information requested. Submit this application and 1 wallet-size or larger glossy print of portrait quality suitable for newspaper reproduction, (not enclosed in plastic); in color & a copy of your Driver's License or State-Issued Photo ID certificate of age to:

**Maine Lobster Festival, c/o Coronation Committee, P.O. Box 552, Rockland, ME 04841**

For any questions, please phone Sharon T. Lombardo at 594-4559/cell:691-5203

**DEADLINE: 4/15/09**

**NOTE:** No application will be accepted unless accompanied by the full \$500 entrance fee. Checks should be made payable to Rockland Festival Corp. Be sure we have full name and contact information of sponsor(s). Incomplete applications or applications postmarked before March 1, 2009 will not be accepted and will be returned to the applicant.

APPLICANT'S FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARENT'S NAMES: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (DAY) \_\_\_\_\_ (NIGHT) \_\_\_\_\_ HEIGHT: \_\_\_\_\_ DRESS SIZE: \_\_\_\_\_

(CELL) \_\_\_\_\_ (EMAIL ADDRESS:) \_\_\_\_\_

HOBBIES: \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_ YEAR OF GRADUATION: \_\_\_\_\_

SCHOOL ACTIVITIES: \_\_\_\_\_

FUTURE PLANS: \_\_\_\_\_

PRESENT EMPLOYMENT/SCHOOL: \_\_\_\_\_

**SPONSORS:**

NAME: \_\_\_\_\_ AMT. \$ \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ AMT. \$ \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ AMT. \$ \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ AMT. \$ \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ AMT. \$ \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_



# 2009 ROCKLAND FESTIVAL CORPORATION

## Coronation Contest Consent Form

In consideration of acceptance of this entry, I hereby agree to abide by the Guidelines set forth in this contest. I also hereby waive and release any and all rights and claims from damages I may have against the sponsors and officials for any and all injuries suffered by me in this contest.

\_\_\_\_\_  
Applicant's name

\_\_\_\_\_  
Witness

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### PHOTO CONSENT FORM

I, \_\_\_\_\_ consent that the photographs, artwork, audio, video, or writing submitted may be used by the Rockland Festival Corporation, its assigns or successors, in whatever way they desire, including television, CD-ROMs, and any other form for the storage, retrieval and reproduction of information, images; furthermore, I hereby consent that such information, photographs, videos, and the plates and/or tapes from which they are made shall be their property, and they shall have the right to duplicate, reproduce and make other uses of such information, photographs, videos, recordings, and plates as they may desire free and clear of any claim whatsoever on my part.

**IN WITNESS WHEREOF** I have hereunto set my hand, in the State of Maine on this \_\_\_\_ day of \_\_\_\_\_, 2009.

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Name of Parent/Guardian or Witness: \_\_\_\_\_  
(If under the age of 18)

Signature: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_