

TEENY TINY BABY MISS LABOR DAY 2020

RULES and ENTRY FORM

RULES:

1. Contestants must be between the ages of birth and 12 months by September 4, 2020. The child must not have reached her first birthday by September 4, 2020. (Newborn to not yet one year old.)
2. Contestant is required to supply **one** photo which must be at least 3" x 5", but no larger than 8" x 10" in size. The photograph may be color or black and white. The photo will not be returned. Each photo must be accompanied with a completed entry form. Be sure to label the back of photo with child's name. Mail completed entry form and photo to:
Debbie White
3255 Nester Hill Rd
Newburgh, IN 47630
Phone: 812-853-0556 Email: cdm69@wowway.com
3. Photo(s) shall be of the contestant/child only and shall not contain any other pets or individuals.
4. In addition, if you want your child's photo to be printed in the Labor Day Celebration Booklet, you must submit a copy of this photo or another photo to Warrick Publishing by August 10, 2020 (contact by phone: 812-897-2330). Please specify 2020 Labor Day Association Teeny Tiny Baby Miss Contest, child's name, parents, age and contest category.
5. There is no deadline for entries, but voting takes place during the 2020 Labor Day Celebration.
6. All photos will be displayed for voting. Voting will start Friday, September 4, 2020 at 5:00 pm and continue throughout the Celebration until Monday, September 7, 2020 at 2:00 pm (local time).
7. \$1.00 = 100 Votes. Winner will be determined by total votes. All proceeds will be donated to the Labor Day Association.
8. Voting will stop at 2:00 pm (local time) on Monday, September 7, 2020. Winner will be announced following the tally of all votes.
9. Winner will receive a trophy. If not present, winner will be contacted.

ENTRY FORM:

REQUIRED

NAME _____ GENDER _____ Female _____

BIRTH DATE _____ AGE(on September 4, 2020) _____

PARENTS _____ EMAIL ADDRESS _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____

OPTIONAL

SOMETHING I WOULD LIKE TO SHARE ABOUT MY CHILD: _____

SPONSORING UNION (optional) _____

MEMBER _____ RELATIONSHIP _____

REQUIRED

I understand that the child's name, photo, and other entry form information will be on display for voting purposes and after that on the Labor Day Website. I also grant permission for the Labor Day Association to use my child's photo and entry form information in any publication LDA deems appropriate.

Signature _____ Printed Name _____ Relationship _____