



**Horned Toad Derby Princess Contest  
Coalinga Area Chamber of Commerce  
2018 Annual Horned Toad Derby Candidate Form  
Open to Ages 5-13**

**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_  
Please Print

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **TELEPHONE** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_ **AGE** \_\_\_\_\_

**Favorite Princess:** \_\_\_\_\_ **Favorite Color:** \_\_\_\_\_

**INTERESTS / HOBBIES** \_\_\_\_\_

**Favorite teacher** \_\_\_\_\_

**Favorite Book** \_\_\_\_\_

**Favorite Super Hero:** \_\_\_\_\_

**PARENT PLEASE READ AND SIGN:**

I will be responsible for the Discount Ride Voucher Tickets tickets and any money received from my ticket sales. Init \_\_\_\_\_

I understand that I must return all voucher money before I take out more vouchers. Init \_\_\_\_\_

I understand that I must sell **50 Discount Ride Vouchers** to be eligible for the title of Jr. Miss Coalinga. Init \_\_\_\_\_

**Signed** \_\_\_\_\_

**Guardian's Signature** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

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