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717-460-4450

ROYALTY APPLICATION FOR CANDIDACY

CATEGORY: MR. MS. MISS. M_sTER

IDENTIFYING GENDER MALE FEMALE

LEGAL

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

STAGE NAME: _____

I, _____ Agree to raise funds and compete in all phases of the
KSGRA ROYALTY CONTEST ACCORDING to the guidelines & rules as outlined and published in the

KSGRA ROYALTY Program. I further agree that all fundraising will be done according to the guidelines and rules and that all funds will be turned over to the appropriate organization in a timely manner. Upon signing this application I state that I have read and understand all the guidelines and rules of the KSGRA ROYALTY PROGRAM AND CONTEST.

Candidate's Signature: _____ Date: _____