

NJQHA

New Jersey Quarter Horse Association

Queen Contest Application

Name: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Parents Name: _____

Telephone: _____ Cell: _____

E-Mail: _____

College or High School _____ Graduated: _____ Major: _____

Scholastic Average: _____ Major/Favorite Subject: _____

Offices Held, Honors, Activities: _____

Employed: Yes : ___ No: _____ Full-Time : _____ Part-Time: _____

Position Held/Job Description: _____

Interests, Hobbies, Sports, Awards: _____

Community Service: _____

Written Speech: A one page written speech to include an introduction of yourself, family and friends. Your accomplishments, goals, plans and why you believe you can best represent NJQHA as Queen

Must be Postmarked by **June 13,2011**

Mail Completed application to:

Roberta Sharpe-Drout
36 Stoney Creek Ln
Colts Neck, NJ 07722