

# Miss Minnesota

## MISS MINNESOTA LOCAL COMPETITION LICENSE APPLICATION

Application to request Official License Agreement to hold a Miss America Local Preliminary Competition in the STATE OF MINNESOTA. Please complete and return to:

Miss Minnesota Scholarship Competition  
Kathy Shellum  
Executive Director  
PO Box 527  
Cottage Grove, MN 55016  
Or email: [kathysillum@missminnesota.org](mailto:kathysillum@missminnesota.org)  
Fax: 651-768-0205

Each local organization is required to have at least one representative who will attend local and state meetings (live and zoom - to be announced). All local competitions must be held prior to March 1, 2024, for the June 2024 State competition. Greater Minnesota competitions are considered "sweeps" and will be the last local held before the 2024 State Competition. State determines date for sweeps.

Fees:

- \$300 Licensure Agreement Fee due upon acceptance of application for 2024 state competition. Agreement goes June 30, 2023 – June 30, 2024.
- \$450 Contestant Fee, \$300 for a second contestant, is **due 30 days after** your local competition is held. Checks made out to Miss Minnesota Scholarship Org.

Name of Local Competition \_\_\_\_\_  
(If awarding more than one title, please include all titles)

### Local Competition Organization Contact Information:

Name \_\_\_\_\_ (Executive Director)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home \_\_\_\_\_ - \_\_\_\_\_ Work \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ Local competition Website: \_\_\_\_\_

**Please list below Officer's names, addresses, phone and email (if available):**

Name	Address	Phone/Email	Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Location where Local competition will be held (please be specific)**  
\_\_\_\_\_

**Date Requested for Local competition:** \_\_\_\_\_

**Check One:**    **Open (open to entire state)**\_\_\_\_\_    **Closed (only within boundaries listed)** \_\_\_\_\_

**If closed, list territory**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

_____ <b>Signature – Local Executive Director</b>	_____ <b>Date</b>
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_____ <b>Signature - State Executive Director</b>	_____ <b>Date</b>
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**Upon approval by the Miss Minnesota Executive Board of Directors, an Official Miss Minnesota Scholarship Competition License Agreement will be sent to local and is due immediately upon receipt.**

