



MISS GREEK INDEPENDENCE PAGEANT

Sunday, March 8th, 2020

RULES & REQUIREMENTS

Deadline of Application: February 25th, 2020

1. The contestant must be between the ages of 16 and 25 on the due date of the application.
2. A copy of a birth certificate or other valid ID must be submitted with the application.
3. The contestant must be a Hellenic-American female with at least one of her parents being of Hellenic origin.
4. The contestant must be of the Greek Orthodox faith and preferably bilingual (Greek and English).
5. The contestant must be a permanent resident of the New York Tri-State area.
6. The contestant must be at least a junior in high school, a high school graduate, a college student or a college graduate.
7. The contestant must never have been crowned "Miss Greek Independence" in the past.
8. The contestant can take part in the "Miss Greek Independence Pageant" for a second time if she did not win the first time.
9. The contestant must have a gown (not black) and a business suit (as she would wear on a job interview) with her on the day of the pageant and on the day of the "Greek Independence Day Parade."
10. The contestant must be available for the Greek Independence Day Parade to march in the Parade or to be on the "Miss Greek Independence Float" with her gown.
11. All contestants will be involved with the Federation's events during the year of their participation in the pageant.
12. If the contestant is crowned "Miss Greek Independence", she will automatically be a representative of the Federation of Hellenic Societies of Greater New York and will be expected to conduct herself accordingly and in consideration of her title. She will also be responsible to participate in all Federation events and is welcomed to be a member of the Cultural Committee for the year of her reign.
13. The contestant must not be involved in any substance abuse.
14. The contestant will be informed if she is the winner only on the day of the pageant. All contestants must know that it takes courage, a solid upbringing and respect for our Hellenic origin to be a part of this event.
15. The contestant must provide a non-refundable \$50 registration fee.

FEDERATION OF HELLENIC SOCIETIES OF GREATER NEW YORK

P.O. Box 5429, Astoria, New York 11105 * Tel.: (718) 204-6500 * Fax: (718) 204-8986 * info@hellenicsocieties.org

www.hellenicsocieties.org

I, _____, agree to the following:

- If I am selected to be “Miss Greek Independence”, I will not use my title without the written authorization of the Federation of Hellenic Societies of Greater New York.
- I will obtain authorization from the Chairperson of the Cultural Committee of the Federation of Hellenic Societies of Greater New York, before publicly engaging in any discussion pertaining to matters of the Federation of Hellenic Societies of Greater New York.
- Any appearances that I will make or will be asked to make, as “Miss Greek Independence,” will be arranged through, and with the authorization of, the Federation of Hellenic Societies of Greater New York.
- I agree that I will make myself available, to the best of my ability, for appearances and events at the request of the Federation of Hellenic Societies of Greater New York.
- I authorize the Federation of Hellenic Societies of Greater New York to release my personal information (name, photographs, etc.) to the media (press and electronic).
- I agree to conduct myself in a manner befitting the title of “Miss Greek Independence” with dignity and respect for the Federation of Hellenic Societies of Greater New York, our culture, and our heritage.
- I certify that the information on this application is true and understand that if any information is false this will be grounds for disqualification from the pageant or the subsequent revocation of my crown if I win the title.
- I will be available on the day of the Greek Independence Parade, to march with the rest of the contestants, even if I am not selected as “Miss Greek Independence”.
- Should I be selected “Miss Greek Independence,” I agree to return the “Miss Greek Independence” cape, at the end of my reign, in the same condition in which it was received.

Signature: _____	Date: _____
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For Office Use Only:			
Requirements proof _____	Eligibility _____	Registration # _____	
Participation _____	Record # _____	Pre-Contest Meeting _____	Pageant Sash _____



FEDERATION OF HELLENIC SOCIETIES OF GREATER NEW YORK, INC.
Official Parade Organizer Since 1938



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Application for the 2020 Contest

Applicant's photo

Registration # _____

Full Name: _____

Attached
4 X 6 or 5 X 7
portrait photo
here

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Personal Information

Name: _____ Tel # _____

Address: _____ Cell # _____

D.O.B. _____ Birthplace: _____ Email: _____

Mother's Name: _____ Origin: _____

Father's Name: _____

Origin: _____

Education

Elementary: _____ High School: _____

College/University: _____ Other: _____

Work Experience

Company _____ From _____ to _____

Company _____ From _____ to _____

Organizations _____

Volunteer Work _____

Hobbies _____

What made you want to participate in The Greek Independence Pageant?

You may use additional pages should you prefer.

Signature _____ **Date** _____