NATIONAL ASPARAGUS FESTIVAL
QUEEN APPLICATION

NAME_____

ADDRESS_____
Street City State Zip

PHONE (____) _____ AGE _____BIRTH DATE_____

MARRIED OR WIDOWED _____HUSBAND'S NAME _____

SPONSOR_____

SPONSOR'S ADDRESS_____

OCCUPATION (PAST OR PRESENT) _____

HOBBIES _____

HUSBAND'S OCCUPATION _____

CHILDREN'S NAMES AND AGES _____

TELL US WHY YOU ARE INTERESTED IN RUNNING FOR THE TITLE OF "MRS. ASPARAGUS":

_____
_____
_____
_____
_____
_____

PLEASE RETURN THIS FORM BEFORE MARCH 1, 2008 TO:

LINDA JONSECK
QUEEN'S COMMITTEE
7029 W. STONY LAKE ROAD
NEW ERA, MI 49446

IF YOU HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CALL LINDA AT 861-2276 (evenings) or THE NAF HOTLINE AT 861-8110. AS SOON AS WE RECEIVE THIS FORM, WE WILL CONTACT YOU WITH QUEEN'S MEETING INFORMATION AND BANQUET INFORMATION.