



# ICFWA Reign 39 Application

*The Reign of "Stronger Together, When We Rise as One."*



### Applicant Information (please print)

Given Name:		Their Majesties Use Only:
Stage Name:		
Current Address:		
City:	State:	
Date of Birth:	Month	Day
Partner or Spouse:		
COM and/or Lifetime Titles:		
Other organizations/courts you are a member of:		

### Contact Information

Home Phone:	
Cell Phone:	Do you receive text?
Email 1:	
Email 2:	
Facebook:	
Other:	
What is the best way to contact you from above?	
May we print the above information in the Membership Roster? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I would like to be added to the: <input type="checkbox"/> yahoo group <input type="checkbox"/> treehouse yahoo group <input type="checkbox"/> txchat	

### Participation Level for Reign 39

Please check the box that will realistically apply to you. I would like to be a member of the court and

attend meetings only  25%  50%  75%  100%

**% will be adjusted for number of events possible for a particular month**

What side of the Line do you plan to participate on?  Emperor ~ Male/Male Impersonation

Empress ~ Female/Female Impersonation

Would you accept a place on the Line of Succession?  Yes  No

If YES ~ Why should you be on the Line of Succession?

Are there any line positions you would not accept?

**ALL TITLES FOR REIGN 39 ARE AT THE DISCRETION OF THEIR MAJESTIES**

### Other

(initials) I give my permission to use my  given name and/or  stage name, photos, videos or any media for the use on ICFWA website, facebook or any other ICFWA internet site or publication

(initials) I understand to be an ICFWA Court Member to Reign 39, I must promote the goodwill of the Court and exercise truth, discipline and integrity with all persons at all times.

(initials) I understand I must attend a court meeting to become a member and will have voting privileges at the next meeting. (per the bylaws of the ICFWA)

### Acknowledgement

Applicant acknowledges that she or he is not a registered sex offender in any state, or currently under investigation for a sex offence. Applicant also acknowledges that she or he has not been convicted of a misdemeanor and or felony involving matters related to fiduciary responsibilities in a for profit or non profit organization in the last 7 years.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**TURN THE PAGE OVER**

# ICFWA Reign 39 Application (CONT.)

*The Reign of "Stronger Together, When We Rise as One"*

**OTHER (CONT.)**

What days do you prefer to do shows? {Please circle all that apply}

Thursday      Friday      Saturday      Sunday

**I am interested in: (circle all that apply and/or fill in other)**

**Care Team:** Planning Shopping Deliveries Set up/Clean up Participate Other:

**Production Numbers:** Planning Music Choreography Other:

**Internet/Computer:** Website Facebook Calendar Other:

**Shows:** Host Entertain Spotlight Count Money Decorate Other:

**Contest/Pageants:** Host Entertain Judge Spotlight Count Money Decorate Other

**Sponsorship:** Corporate Small Business Individuals Other:

**Press Releases/Advertisements:** Posters Media Other:

**Coronation Committee:** Ad Sales Booklet Layout Decorations Set Design Vendors Helper

Other:

**Buffets:** Set up/Clean up Food Preparation Other

**GPW Parade Entry:** Be on the committee Float Other:

**Bylaws:** Be on the committee

**Other:**

**I would be interested in being a Chair for one of the committees above: (state committee/committees)**

**Anything you would like for us to know about you & your talents**

Signature of applicant:

Date: