



The Feast of the Flowering Moon
PO Box 879
Chillicothe, Ohio 45601

Dear Contestant:

Thank you for applying to participate in the 2026 Feast of the Flowering Moon Princess Pageant.

This letter is to inform you that the pageant will be held on **Sunday, May 03, 2026**, at the **Majestic Theatre** located at 45 East Second Street, Chillicothe, Ohio 45601

We are scheduling categories and times for all age groups.

<u>Category</u>	<u>Check In</u>	<u>Pageant</u>
Tiny Miss	10:00am	10:30am
Petite Miss	11:30am	Noon
Little Miss	1:00pm	1:30pm
Junior Miss	2:30pm	3:00pm

Enclosed you will find a consent form to be completed by you. Please bring this information with you this day.

The top three spots will be announced and crowning will take place. The winners in each category will receive their crowns and sashes that night and will be introduced on Stage opening night of the festival.

The cost for the event on May 3rd, is \$5.00 for anyone who would like to watch the competition.

Please note that it is **not** necessary for you to dress your child in a pageant dress. They can wear casual dress, something they would wear to Sunday School or an Easter dress. The choice is yours.

If you have any questions, please feel free to contact me at 740-701-3406. I am looking forward to meeting you on May 3rd.

Sincerely,

Jennifer Detillion, Pageant Director



**FEAST OF THE FLOWERING MOON
PRINCESS PAGEANT
ENTRY FORM**

CHILDS NAME _____

DAUGHTER OF _____ **&**

DAUGHTER OF _____

ADDRESS _____

Cell phone _____ **Date of Birth** _____

Please Mark which Age Group Applies to your Child

Age as of May 3, 2026

TINY MISS (AGES 3-4) _____ **PETITE MISS (AGES 5-6)** _____

LITTLE MISS (AGES 7-9) _____ **JUNIOR MISS (AGES 10-12)** _____

ENTRY FEE \$ 20.00

All applications must be **Received by Monday, April 20, 2026 - NO EXCEPTIONS**

Return your application and fee to:

FEAST OF THE FLOWERING MOON PAGEANT

PO BOX 879

CHILICOTHE, OHIO 45601

Please contact **Jennifer Detillion** via email at jdettillion98@gmail.com or 740-701-3406 for more information.

I HAVE REVIEWED ALL INFORMATION and I AGREE FOR MY CHILD TO COMPETE.

PARENT SIGNATURE _____ **DATE** _____

FEAST OF THE FLOWERING MOON

PRINCESS BIO

TINY, PETITE, LITTLE & JUNIOR

CHILDS NAME _____

SIBLINGS _____

PETS _____

FAVORITES :

COLOR _____ **FOOD** _____

CARTOON _____ **SINGER** _____

FAVORITE PRINCESS _____

FAVORITE TV SHOW OR MOVIE _____

WHAT DO YOU WANT TO BE WHEN YOU GROW UP _____

**FUN FACTS ABOUT
YOURSELF** _____

**WHAT DO YOU LIKE TO DO FOR
FUN** _____

YOUR CHILD WILL BE ASKED QUESTIONS BASED ON THE ANSWERS PROVIDED.

PLEASE RETURN THIS FORM WITH THE ENTRY FORM

Feast of the Flowering Moon

Statement of Consent and Release

The following statement of consent and release must be completed and returned before contestant will be permitted to enter the Feast of the Flowering Moon Contest.

NAME OF CONTESTANT: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

SCHOOL: _____ **AGE:** _____

I hereby agree that I will abide by the decisions of the judges and the contest rules as set forth by the Feast of the Flowering Moon and to having my picture/name appear on/in any Newspaper, Electronic Media, Printed Material or Web Page in association with the Feast of the Flowering Moon. I understand my picture may be displayed in accordance with the above-mentioned activity. I further acknowledge that my name may or may not be used in connection with my picture.

I hereby agree to waive any claims against the Feast of the Flowering Moon or (Officers, Trustees, Chairman or Volunteers) which may arise from the use of said picture or names in the above event.

PARENT/GUARDIAN SIGNATURE:

DATE SIGNED: _____