



MISSISSIPPI

PROGRAM BOOK INFORMATION-FORM 1

Local Program _____

Full Name _____

Year _____

The following information will be placed in the Program Book next to your photograph.

Your Preferred Name _____

High School Name _____

State how you prefer your family's names to be listed in the Program Book:

Parents _____

Sister(s) _____

Brother(s) _____

Talent:

Type (pointe, vocal, piano etc.): _____

Music: _____

College Preference: _____

Career Goals: _____

List up to 10 Honors/Activities:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Local Program Information- You may need to contact your Local Chairman for this information.

Sponsor _____

Chairman _____



PRODUCTION INFORMATION – FORM 2

Local Program _____

Full Name _____

2011

1. Talent presentation (Be Specific): _____

2. Title of music _____ Is it from: a Play___ TV/Movie___ Singer/Songwriter___

3. Recorded musical accompaniment used? YES NO

4. Microphone requirement: NONE STAND HAND HELD LAPEL HEADSET

5. Costuming: Describe in detail, including color, the costume you will use for performance.

6. Talent Presentation: Describe in detail the components of your performance.

Please write an introduction for us to use in presenting you to the audience. It should be about 20 seconds long and include any unusual information about your talent, costume, music and/or script. Our production committee will review your introduction and discuss any changes that may be necessary. The following is a sample introduction:

“Mary Smith has been a dancer for 10 years. Tonight, she will share with us her love of art as she presents a pointe number she choreographed to the song “Friends” by Michael W. Smith and Kathy Troccoli. Through her dance, Mary hopes to share her belief that saying good-bye can be sweetened by the understanding that through faith and love, friendship can be forever. I present Mary Smith, Distinguished Young Woman of New York.

Your Talent Introduction:



HOST FAMILY INFORMATION – FORM 4

Local Program _____

Full Name _____

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It is important that you not neglect good eating habits while you are in Meridian. Please let your host family know of your particular likes and dislikes regarding types of foods. They will be providing you with breakfast and dinner most days (lunch is provided during rehearsals or activities).

List your favorite Breakfast and Dinner foods.

What are your favorite snacks and drinks?

If your host mom could prepare your favorite meal, what would it be?

Do you have any allergies?

Food? _____ Yes _____ No list _____

Pets? _____ Yes _____ No list _____

Medications? _____ Yes _____ No list _____

Your host family has dedicated this week to helping you make the most of your stay in Meridian. Don't be embarrassed to ask for their help and to show your appreciation of them during your stay and after you return home.

If you should need anything during your stay in Meridian, your host family should be the first place you go. If they cannot help you, they will see that someone with the program can. They are here for you!



MISSISSIPPI

HOMETOWN PUBLICITY INFORMATION – FORM 5

Local Program _____

Full Name _____

2011

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Name of your local newspaper: _____

Address _____ City _____ State _____ Zip _____

Contact person: _____

Tel. #: (____) _____ e-mail _____ FAX (____) _____

Name of local TV station: _____

Address _____ City _____ State _____ Zip _____

Contact person: _____

Tel. #: (____) _____ e-mail _____ FAX (____) _____

Name of local Radio Station: _____

Address _____ City _____ State _____ Zip _____

Contact person: _____

Tel. #: (____) _____ e-mail _____ FAX (____) _____

Your Local participation was

Local Program _____ Local Chairman _____

Contact information _____ e-mail _____

Distinguished Young Women scholarships and awards:

Indicate the dollar value of all the Distinguished Young Women awards you have received:

	Local	State	Total
Cash Scholarships	_____	_____	_____
Grants/tuition scholarships	_____	_____	_____
Merchandise and gifts	_____	_____	_____
Total	_____	_____	_____



RELEASE OF LIABILITY - FORM 5

My daughter/legal ward, _____ has my permission to participate in the 2022 Distinguished Young Women of Mississippi program program week, to be held on July 18 - July 24, 2022 which I understand will be a "Live and In Person" event. I hereby release and discharge Distinguished Young Women/MJM volunteers, State Chairman of Distinguished Young Women of Mississippi/MJM and all other directors, officers and committee members of Distinguished Young Women of Mississippi/MJM and Distinguished Young Women of America/AJM, from any and all claims, demands, damages, actions, causes of action, at law or in equity, resulting or to result from her participation in the program, including, but not limited to, any liability for injury, unless caused by the gross negligence or willful misconduct of anyone so released.

PARENT/GUARDIAN SIGNATURE

DATE