



Now Accepting Applications for the
Rosemead Queen 2023 / 2024

Represent Rosemead

As Queen, you will have the prestigious opportunity to represent the City of Rosemead at events throughout the year. The ideal candidate should display a combination of poise, personality, academic achievement, community involvement and the ability to speak in public.

Rosemead Queen Requirements

Rosemead residents who are currently enrolled in grades 9 - 12 and are between the ages of 14 and 18 (as of May 30, 2023) are eligible to participate in the Rosemead Queen Program. Applicants must have a minimum 3.0 GPA (a copy of the applicant's current report card or transcript must be submitted with the application). The Rosemead Queen must participate in the City of Rosemead events listed below. Requests from other community organizations may be submitted to the City, which the Rosemead Queen may attend based on her availability. Actual dates are forthcoming.

- 4th of July Parade, Carnival, and Opening Ceremonies
- Concerts in the Park
- National Night Out
- Fall Fiesta
- Trunk or Treat
- Tree Lighting Ceremony & Treats with Santa

Apply

The application and rules can be found at www.cityofrosemead.org or for more information, call the Rosemead Parks and Recreation Department at (626) 569-2160.

This year's Rosemead Queen will receive a \$50 Gift Card.

Application Deadline: May 11, 2023

ROSEMEAD QUEEN – 2023 / 2024

Candidate Information

Name _____ Date of Birth _____

Address _____
Street City Zip

(The above address will be used for our official mailings. Please feel free to include another address if necessary.)

Candidate's Email Address _____

Parent/Guardian's Name _____

Parent/Guardian's Phone # _____ Cell Phone # _____

Parent/Guardian's Email Address _____

Emergency Contact _____ Phone _____

Education

High School _____ Grade _____

Hobbies/Activities/Clubs/Awards _____

Judging Criteria

The *Rosemead Queen* Committee will evaluate all applications and supplemental materials from each candidate to determine who might best represent the community. Up to four candidates will be selected to participate in an oral interview. The best candidate will be selected to serve as the *Rosemead Queen*. The *Rosemead Queen* Committee reserves the right to disqualify any applicant/application that does not meet competition requirements. The decision is at the sole discretion of the committee and their decision is final.

Application Packet Check List

- ___ Completed application
- ___ Copy of current report card or transcripts
- ___ Copy of birth certificate
- ___ Copy of school ID
- ___ Bio sheet, not to exceed 500 words, detailing information (awards, hobbies, organizational memberships, future goals, etc.) you would like to share with the selection committee
- ___ Five digital photos or wallet sized photos for use in event promotion
- ___ A 1200–1500-word essay (typed and double-spaced) detailing why you should represent the youth of Rosemead as the Rosemead Queen.

Candidate Agreement

I attest that the information provided is true and correct and that proof will be provided upon request. I have read and understand the Entry Qualifications and Judging Criteria of the City’s *Rosemead Queen* program and agree to abide by all. I further agree that by signing this agreement, I hereby grant the City of Rosemead and its legal representatives editorial, trade, and advertising rights to use and publish photographs in which I may be included, for editorial, trade, advertising, and any other purpose and in any manner or media. I hereby release the City of Rosemead, its representatives, and assignees from all claims and liability relating to said photography.

Candidate Signature _____

Parent/Guardian Signature (if under 18 years of age.) _____

Please return completed application to: City of Rosemead

Rosemead Queen Program
3936 North Muscatel Avenue
Rosemead, CA 91770

CITY OF ROSEMEAD
ROSEMEAD QUEEN PROGRAM
RELEASE OF LIABILITY, HOLD HARMLESS, AND AGREEMENT NOT TO SUE

I _____ (Participant's Name—if Participant is a minor, include name of parent or guardian here _____, and parent or guardian hereby expressly and irrevocably consents to minor's participation and all uses of "I" or "me" herein are made on behalf of both the minor and the parent or guardian), fully understand that my participation in the **Rosemead Queen Program** exposes me to the risk of personal injury, death, or property damage. I understand that there are risks inherent in such activity and hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

In consideration for being permitted to participate in this activity I hereby release, discharge, and agree for myself, my heirs, administrators, executors and assigns not to sue the **City of Rosemead** for any injury, death, or damage to or loss of personal property arising out of, or in connection with, my participation in the activity from whatever cause. I further agree to indemnify and hold harmless the **City of Rosemead** from any and all claims, demands, actions, or suits arising out of, or in connection, with my participation in the activity.

In case of accident or other emergency, I hereby authorize personnel or volunteers of the City of Rosemead or agents of the City to secure medical care deemed necessary as a result of accident or injury of me. In the event of illness or injury, I hereby consent to whatever x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care considered necessary in the best judgment of the attending physician, surgeon or dentist, and performed by or under the supervision of a member of the medical staff or the hospital furnishing medical or dental services.

I also permit the use of activity/event photography and/or video of my child or myself for media promotion.

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT OF MY OWN FREE WILL.

Signature: _____ Date: _____
Parent or Guardian must sign for those under 18 years of age

Address: _____ City: _____

Telephone: _____ Cell: _____

Emergency Person: _____ Emergency Telephone: _____