

Little Miss Washita County (6-8 years)

Questionnaire

Name: \_\_\_\_\_ Age: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Hobbies:

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Something you want the Audience to know about you:

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Other Activities:

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Future Goal:

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1. If you had magical powers, what would you do with them?

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2. If you could meet one person, who would it be and why?

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3. If you could go anywhere in the world on a plane, who would you take and where would you go?

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4. What makes a good friend?

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5. What is your least favorite chore you do at home and why?

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