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| **Beccles Prince Entry Form**  **aged 8-14** | |
| Print out this blank form.  Complete and send it AND a photo to:  Mrs A Tackley, 25 Cromwell Avenue, Beccles, Suffolk NR34 9XF. Tel: 01502 715671  You must live within a 12-mile radius of Beccles, go to school or work in Beccles to be able to enter.  **No Entry’s will be accepted on the Night!** | |
| Name: | |
| Address: | |
| Telephone Number: email: | |
| Age: | |
| School/college attended or Work: | |
| Hobbies &  Interests: | |
| Why would you like to be Beccles Prince: | |
| Which qualities make you a good Prince: | |
| I consent to my son entering the competition  I declare that my child has no Criminal convictions or have declared these to the organisers.  I agree to publicity photographs of event being taken and used as appropriate  Parent/ guardians signature of all under 18year old contestants | |
| ALL Competitors MUST be available for the following events: | |
| Beccles Hospital Fete | Saturday 28th June 2025 |
| Beccles Carnival Weekend | Saturday 16th and Sunday 17th August 2025 afternoons only |
| Miss Beccles selection 2026 | May 2026 (TBC) |