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Outline
Headings you add to the document will appear here.

Rising Star Checklist

Rising Star Name: _____

Contestant Name: _____
(if you have one selected)

Age: ____ Grade: _____ DOB: _____

Parent Name: _____

Phone: _____

MAIL YOUR ENTRY FEE OF \$75 BY SEPTEMBER 20, 2024

**Make Check Payable to Sherri M. Williams - Miss Lake Martin
Address: 595 Winding Road, Dadeville, AL 36853**

IF YOU WOULD LIKE TO SEND VIA VENMO, CONTACT ME FOR INSTRUCTIONS



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