



VQHA Queen Contest Application

Applications Due: August 15, 2025

Name: _____

Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Phone: _____

AQHA Number: _____

Email: _____

Parent(s) Name(s): _____

College or High School Name: _____

Graduation Year: _____ GPA: _____

Major/Favorite Subject: _____

Show Record: (Please attach AQHA print out and/or list style of shows attended, participated in and any awards achieved in last two years)

Activities, Honors, and/or Offices Held: _____

Employed? (circle one) Yes No, If yes: Part time or Full Time

If yes, company and title/position: _____

Include photo here

Interested, Hobbies and / or Sports:

Community Service:

Interesting Facts about yourself:

Career Ambition:

One page typed biography about yourself and your family:
(must include with application submission)

Please provide 3 References:

Name: _____ Title: _____ Phone: _____

Name: _____ Title: _____ Phone: _____

Name: _____ Title: _____ Phone: _____

Please initial and sign:

___ I confirm that the above information is accurate and complete to the best of my abilities

___ I confirm that I have read the entire document outlining the Queen program, expectations and requirements, and agree to abide by all

By signing below, you agree to adhere to and abide by all requirements of the VQHA Queen and VQHA Queen Program:

Name (print): _____

Signature: _____
(Parent Name and Signature if applicant is under 18 years of age: _____)
_____)