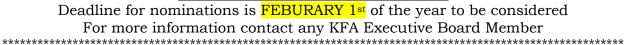
## **Kentucky Firefighters Association**

## **Legacy Award Nomination Form**



**Please print	legibly in all fields**
Individual Being Nominated:	
Section for Living Nominees	
Nominees Mailing Address:	Daytime Phone Number
City, State, Zip Code:	( )
Current status in Fire Service: O Active	Retired Date of Retirement:
Department:	
Spouse or nearest living relative:	Relationship:
Relatives contact phone number, if other than	n nominees: ( )
Section for Deceased Nominees	
Date of Birth:	Date of Death:
Department:	
	Relationship:
Relatives Mailing Address:	Daytime Phone Number
City, State, Zip Code:	( )
Complete for all Nominees	
Date Joined the Fire Service:	
Current Rank or Last Known Rank:	
KFA or Regional Association Offices Held and Dates:	
Above and Beyond service to the KFA, Regional Association, or Fire Department:	
	•
Submitted By:	Date:
Department:	
Mailing Address:	
City, State, Zip Code:	Phone: ( )
Mail To:	P Fmail to:

KFA Secretary Eric Philpot Corbin Fire Department 805 South Main Street Corbin, KY 40701

KFA Secretary Eric Philpot Subject: Legacy Award secretary@kyfa.org