



Kentucky Firefighters Association

Legacy Award

Nomination Form



Deadline for nominations is **FEBURARY 1st** of the year to be considered

For more information contact any KFA Executive Board Member

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: ☐ Active ☐ Retired Date of Retirement: _____
Department: _____
Spouse or nearest living relative: _____ Relationship: _____
Relatives contact phone number, if other than nominees: () _____

- **Section for Deceased Nominees**

Date of Birth: _____ Date of Death: _____
Department: _____
Spouse or nearest living relative: _____ 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:

KFA Secretary Eric Philpot
Bush Fire Department
8708 East Laurel RD
LONDON, KY 40741

OR

Email to:

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