

The KENTUCKY FIREFIGHTERS ASSOCIATION, Inc. HALL OF FAME COMMITTEE

NOMINATION FORM

Nominations MUST be Postmarked or Received via Email by **APRIL 15th** of the Induction Year to be considered



Individual Being Nominated: ______

Living Deceased

\Rightarrow Section for Living Nominees

Nominees Mailing Address:		Daytime Phone Number
City, State, Zip Code:		()
Current status in Fire Service: Active Retired	Department:	
Spouse or nearest living relative:		_Relationship:
Contact phone number, if other than nominees: ()	

\Rightarrow Section for Deceased Nominees

Date of Birth:	Date of Death:	Department:		
Spouse or nearest living re-	lative:	Rela	tionsh	iip:
Relatives Mailing Address	:		Day	time Phone Number
City, State, Zip Code:			()

\Rightarrow Complete for all Nominees

Date Joined the Fire Service:	Current rank or last known rank:	

KFA Offices held and dates:

KFA Committees, Chairs, etc. and corresponding dates:

805 South Main Street CORBIN, KY 40701

Other pertinent Above and Beyond service to the KFA or Regional Association service:

**To assist the committee in its selection of inductees, please attach a letter of recommendation, describing why this individual is worthy of this most prestigious award to be given by the Kentucky Firefighters Association.

Submitted by (please print):	Date:		
Department you are representing (must be a KFA member dept):			
Mailing Address:			
City, State, Zip:	Phone: ()		
Mail to:	or E-Mail to:		
Eric Philpot	Secretary Eric Philpot		
c/o Corbin Fire Dept	secretary@kyfa.org		