

NOMINATION FOR KANSAS FAIRS & FESTIVALS HALL OF FAME AWARD

DUE DECEMBER 15TH

Please complete this form and provide sufficient documentation of the nominee's contributions and achievements to support the candidate's worthiness to be inducted into the KANSAS FAIRS & FESTIVALS HALL OF FAME.

Name of Nominee		Age
Address of Nominee		
City	State	Zip
Fair / Organization □Check here if this nomination is posthumou	IS	
Has the nominee attended the Kansas Fairs & () Yes () No If so, How many years, nominee attended,,,,	and years of the	e last five conventions the
 Furnish the following information on a separate Citation: A concise supporting selected as the recipient of this List offices and committees not member of KFFA and other orgonized chamber of commerce, etc.) Give a brief summary on nominany innovative ideas that were Resume of the nominee with resumporting documents such as other information. PLEASE SUBMIT NO MORE 	statement as to shonor. minee has serve ganization such nee's accomplis put into practice eferences. s newspaper artis	why nominee should be ed on (at your event, as a as, church, 4-H/FFA, hments to your fair. List e. icles, special citations, or
Submitted by:	Phone #	<u> </u>
Your Position with Fair / Organization		
Your Address:		
Mail form with supporting documents to: Kansas Fairs & Fest		ion,

Kansas Fairs & Festivals Association Hall of Fame Committee P.O. Box 158, Liberal, Ks 67905

