

**NOMINATION FOR THE MASSACHUSETTS
HALL OF FAME AWARD
FOR DISTINGUISHED SERVICE TO THE FAIR INDUSTRY**

This form must be completed in full and contain sufficient memoranda documenting nominee's contributions and achievements to determine the candidate's worthiness to receive the Award.

Return this form by September 1, to the Massachusetts Agricultural Fairs Association, Bridget Burns, Secretary, PO Box 469, Abington, MA 02351.

Submitted by: _____ **Date:** _____

Organization: _____

Telephone: _____ **Email:** _____

1. Name of Nominee: _____

2. Organization Affiliation: _____

3. Title: _____

4. Address: _____

5. Telephone: _____ **Email:** _____

6. Citation: A concise (approximately 50 words) supporting statement as to why the nominee should be selected as the recipient of the Award. This statement will form the basis for the official citation should the nominee be the Award recipient.

7. References/Sponsors: Include two MAFA references:
