
**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 this award.

Return this form by September 1st to: Jeanne Tippet, Secretary; Massachusetts Agricultural Fair Association; PO Box 704; Chicopee MA 01021-0704

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 (2) MAFA references:
