

International Towing & Recovery Hall of Fame & Museum
Hall of Fame Nomination Form
2017

INFORMATION ABOUT NOMINEE:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Country: _____ Mail Code: _____
Date of Birth: _____ Place: _____
Telephone #: _____ Fax#: _____
Year First Entered Business: _____ Employer/Company: _____
Name of Current Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Country: _____ Mail Code: _____
Email Address _____

Significant Contributions to the Towing & Recovery Industry by nominee include:

State and National Association, and Community Involvement:

ATTACH ADDITIONAL PAGES AS NECESSARY

***INFORMATION ABOUT PERSON MAKING THE NOMINATION:* Must be a regular or corporate member of the International Towing & Recovery Hall of Fame & Museum.**

Name: _____ State: _____ Zip: _____
Phone #: _____ FAX #: _____
Signature of Sponsoring Member: _____

**RETURN COMPLETED APPLICATION TO THE ITRHFM OFFICE BY 12/31/15
ITRHFMM – 3315 Broad Street, Chattanooga, TN 37408
HALL OF FAME QUESTIONNAIRE (Please mark envelope CONFIDENTIAL)**

**PLEASE RESPOND TO EACH QUESTION BY GIVING AS MUCH INFORMATION AS YOU CAN
ABOUT THE NOMINEE**

1. Full name of Nominee: _____

2. Owner or Employee: _____

3. Years in the Towing & Recovery Industry: _____

4. Type of Business:

Light / MD / HD Towing & Recovery (Circle one or more)

Transportation / Storage (Circle one or more)

An explanation of business activities if not a tower (i.e. designer, manufacturer, writer, etc..) _____

5. Personal Information:

Age: _____ Marital Status: _____

If married, name of spouse: _____

Children, if any, and ages: _____

Are any of your children in business with you?: _____

6. Special training, education, or certifications: _____

7. Membership in trade associations or industry affiliations: _____

8. Positions held in associations or affiliations: _____

9. Special recognition(s) for outstanding service or contributions to the Towing & Recovery industry or your local or State community: _____

10. Are you, or have you been a member of the ITRHFM (previously Friends of Towing)?

11. Who will escort and present you at the Hall of Fame Induction?

Name: _____

Address & Fax #: _____

12. Additional Comments or attachments: _____

Please submit a photo along with this application