

Resolution Committee Memoriam

Since the last Convention, if a director, worker, or member of your Fair organization has passed away, please fill out the information below. Please send/bring a picture of the deceased for use in the Memorial display. All pictures will be returned at the conclusion of the Convention. **Mail this form to: Dr. Marilyn Trainor, 436 Harris Drive, Watertown, NY 13601; Email to Trainorm@aol.com or call 315-430-1746 by January 1st.**

Name: _____	Age: _____
Was he/she active in the Fair at the time of death?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none">• If so, in what capacity? _____• If retired or served previously, what position was held? _____	
Number of years involved with the Fair: _____	
Active in the NYS Association of Fair/IAFE?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, in what capacity? _____	

Any additional information: _____	

List three words to describe: _____	

A copy of the Memorial Resolution will be mailed to the deceased closest family member.	
Name/Address: _____	

Fair: _____	County: _____