

Florida Quarter Horse Association Hall of Fame Application

Nomination Form for Induction into the FQHA Hall of Fame

Applicant/Nominator Information

- **Name:** _____
- **Address:** _____
- **City, State, ZIP:** _____
- **Phone:** _____
- **Email:** _____

Nominee Information

- **Name of Nominee:** _____
- **Category:** (check one)
 - Horse (must be deceased)
 - Person (may be living or deceased)
- **Date of Birth** _____
- **Place of Birth:** _____
- **Family Contacts, if deceased** _____
- **Owners (if horse):** _____

Summary of Achievements

Please provide a summary detailing the nominee's contributions to the Florida Quarter Horse Association. Include significant accomplishments, awards, leadership roles, and impact on the community. Attach additional pages if necessary.

Supporting Documentation

- Letters of recommendation (minimum of two required)
- Photographs, newspaper or magazine articles, and other relevant materials
- List of awards and recognitions

Statement of Support

Please explain why you believe the nominee should be inducted into the Florida Quarter Horse Association Hall of Fame:

Signature of Nominator: _____ **Date:** _____

Please submit completed application and supporting materials to:

- Florida Quarter Horse Association
- Hall of Fame Selection Committee
- PO Box 325, Laurel, FL 34272
- fqhasecretary@gmail.com

For office use only: Date received: _____