



MARYLAND STATE FIREMEN'S ASSOCIATION

Memorial Service Form

To include a Department member in the 2012 JOINT MEMORIAL SERVICE, please complete and mail this form by **MARCH 1, 2012**. Please list the names of all members (on different copies of this form) who have passed away during the last calendar year (**January-December**). Any listings **not postmarked by March 1st** will have to be included in the next year's Joint Memorial Service due to the required preparation time for printing of the Memorial Book. It is requested that you submit a photograph of good quality that is no larger than 8 x 10. If possible, slides should be converted to prints.

**All entries should be mailed to:
Chaplain Harry Hetz, 13209 Acoustic Court, Silver Spring, MD 20904**

EACH ENTRY REQUIRES AN INDIVIDUAL FORM

INDIVIDUAL SUBMITTING REQUEST INFORMATION		
_____	_____	_____
First Name	MI	Last Name

Address – Picture will be returned to this address - - -		
_____	_____	_____
City	State	Zip Code
_____	_____	
Phone Number (Home)	Phone Number (Work)	
_____	_____	
Email Address - - -	Authorizing Signature	
<i>Notice: By submitting this form, the individual responsible for its submittal authorizes publication of the Memorial information in the LAMSFA/MSFA Memorial Service Program.</i>		

DECEASED MEMBER INFORMATION	
_____	_____
First Name	Last Name
_____	_____
Complete Fire Department/Rescue Squad Name	County
_____	_____
Did Member Hold State Office?	If Yes, Which Office?
_____ Yes / No _____	_____
_____	Year of death _____

Please make additional copies of this form for **EACH** deceased member.
Mail completed forms to: Chaplain Harry Hetz, 13209 Acoustic Court, Silver Spring, MD 20904