



American Red Cross Heroes Breakfast Nomination Form

About the Red Cross Heroes Breakfast Program:

Throughout the Columbia and Montour County areas everyday people perform extraordinary life saving acts. Your local American Red Cross needs your help in identifying and recognizing these heroic acts and the people who make them happen.

Nominees may be individuals or groups. They do not need to be Red Cross volunteers or have Red Cross training.

The 2009 Heroes Breakfasts will take place May 29 at Bloomsburg University (Monty's). Proceeds from the breakfasts will benefit the programs and services of the local Red Cross chapters in Columbia and Montour Counties.

Criteria for Nominations:

- Nominee must have saved or assisted in saving a life by preventing or intervening in a crisis situation or by giving the victim(s) aid they needed, or would have needed, to survive.
- Nominee may be professionally trained in life saving skills or a Good Samaritan.
- Nominee cannot have caused or contributed to the incident.
- Nominee must live, work or attend school in Columbia or Montour County. The heroic act may have occurred outside the area.
- The heroic act must have occurred between 1/1/08 – 12/31/08
- Nominee (or family representative if deceased or on active duty) must be available for promotional opportunities and be able to attend the Heroes Breakfast in their area.

Visit our website www.bloomsburgredcross.org for additional information or contact Rita Inklovich at 570-784-1395

To nominate a Hero, please complete this form and mail it to 119 East Seventh Street, Bloomsburg, PA 17815 OR fax it to us at (570) 784-1577, by February 13, 2009.

Hero Award Categories Please select one

Fire Safety

Law Enforcement

Medical

Military

Youth Good Samaritan
18 years or younger

Adult Good Samaritan

Animal Rescue

A person who saved the life of an animal **or** an animal that saved a human life

Nominee

First Name _____

Last Name _____

Street Address _____

City _____

Zip Code _____

Location of the rescue _____

Daytime Phone _____

Email _____

Employer _____

Nominator

First Name _____

Last Name _____

Street Address _____

City _____

Zip Code _____

Daytime Phone _____

Email _____

Employer _____

Witness/Verification Source

First Name _____

Last Name _____

Street Address _____

City _____

Zip Code _____

Daytime Phone _____

Email _____

Employer _____

Nomination Statement

Please attach a statement describing the Nominee's heroic act. Please include names and contact information for additional witnesses or others who can verify the rescue, if available. Supporting documentation may include reports, news articles, photos, video and other important information.