

North Carolina Association of Rescue & E.M.S., Inc.

Technical Rescue of the Year Award

APPLICATION

Squad Name _____

Address _____

E-mail Address _____

Captain / Chief _____

Personnel on the rescue _____

Date of the Rescue _____

Complete details of the rescue (Use attachments, if necessary)

Signature of Person submitting entry

Return to: **N. C. Association of Rescue & EMS, Inc.**
P. O. Box 1914
Goldsboro, NC 27533-1914
Email: jfaircloth@ncarems.org
Fax: 919 736-7759

DEADLINE: July 22, 2025