

**BISHOP FALLON HIGH SCHOOL / HOLY ANGELS COLLEGIATE INSTITUTE
HALL of FAME NOMINATION FORM**

I nominate _____Kevin M Snyder_____ for
induction
into the Bishop Fallon High School/Holy Angels Collegiate Institute Hall of Fame

The nominee fits into one or more of the following categories:

☒ X Distinguished Alumni ☐ Faculty Member ☐ Staff Member
☐ Sports Team ☐ Activity Group (Attach year and members if possible)

CANDIDATES INFORMATION: (Please print)

Name Kevin M Snyder

Address__4685 Southwestern Blvd.,C218

City, State Zip Code____Hamburg. NY14075_____

Phone____716-997-8127_____Cell_____

Email kmsnjl@aol.com

School (Check one) ☒ X BFHS ☐ HACI Class Year_____

A WRITTEN BIOGRAPHY OF THE CANDIDATE MUST ACCOMPANY THIS FORM.
Information should include Education, Career, Outstanding Accomplishments,
Awards, and HACI or BFHS information such as awards, sports etc.
Nominations WILL NOT be considered without a complete Biography of the
Candidate.

NOMINATOR's INFORMATION

Date Submitted:

5/_31_/_2025

Name Kathryn G Snyder

Address__70__Browning Drive

City, State Zip Code____Hamburg, NY_14075

Phone__716-913-3581____ Cell_____

Email__ktshelmet@aol.com_____helmet

**NOMINATIONS TO BE CONSIDERED FOR THE HALL of FAME must be submitted
with a complete, updated biography of the candidate no later than June 1st of
each year. Nominations are to be emailed to BishopFallon.org@gmail.com
or mailed to:**

BFHS/HACI Alumni Association, Inc.
P.O. Box 25
Williamsville, NY 14231

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For more information email BishopFallon.org@gmail.com