

EAHS All Sports Booster Club Athletic Hall of Fame Nomination Form



NOMINEE _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ EMAIL ADDRESS _____

CATEGORY (CIRCLE THOSE THAT APPLY): COACH, CONTRIBUTOR, ATHLETE, HONORARY

IF COACH, WHERE COACHED _____

ANY HONORS OR PERTINENT ACCOMPLISHMENTS _____

IF AN ATHLETE, ACHIEVEMENTS DURING ATHLETIC CAREER _____

IF CONTRIBUTOR OR HONORARY, ANY PERTINENT INFORMATION SUPPORTING THE HONOREE

NOMINATOR (CONTACT PERSON) _____

ADDRESS, CITY, STATE, ZIP _____

PHONE _____ EMAIL ADDRESS _____

Return this form to:

EAHS All Sports Booster Club, ATTN: Hall of Fame Chairman, PO Box 472, Elkhorn, WI 53121.

The selection committee will consider the nominee's contributions to Elkhorn athletics. It will consider the nominee's character and how he/she is respected by peers. References may be checked and the credibility of the reference may be checked. Please feel free to add another page if necessary.

Best of luck in your efforts.