

GREENWOOD HS ATHLETICS HALL OF FAME
Official inductee Nomination Form

All forms must be returned by September 1st. You may nominate an athlete, coach, or team. Please type or print clearly. If deceased, please give the name of nearest relative and phone number.

Name of Nominee _____ Phone _____

Year of graduation or team performance _____ Email _____

The nominee is _____ athlete _____ coach _____ team _____ Individual

HIGH SCHOOL ATHLETE or COACHING CAREER

Sports participated in; Years on Varsity; years as Captain if any (i.e. Football 1,2,3-capt)

1. _____ 3. _____

2. _____ 4. _____

Individual Honors/Accomplishments

Team Honors/Accomplishments

Post High School Athletic or Coaching Career

This Candidate should be in the Greenwood Athletic Hall of Fame because

Your Name Printed _____ Signature _____

Charter Membership Number _____ Address _____

City, State _____ ZIP _____

Email _____ Phone _____