

CLARENCE ATHLETICS

WALL OF FAME

NOMINATION PETITION

NAME OF NOMINEE _____

CATEGORY OF NOMINATION: Former Athlete, _____ Coach/Administrator, _____ Honorary _____

, YEARS AT CLARENCE HIGH SCHOOL _____

Please list the sport(s), honors, or contributions of the person(s) you are nominating. Please add any supporting comments that make this person worthy of membership. Thank You

NOMINEE'S CURRENT ADDRESS:

Street _____

City _____

State _____ Zip _____ Phone _____

NAME OF PERSON NOMINATING

ADDRESS OF PERSON NOMINATING

Street _____

City, State, Zip _____

Phone _____

This petition must be delivered or postmarked by January 31.

Please forward all materials, questions, or concerns to:

**Mr. Brian C. Schmidt
Wall of Fame Committee Chair
Clarence High School
9625 Main Street
Clarence, New York 14031**

**Phone: (716) 407-9043
Fax: (716) 407-9063
e-mail: bschmidt@clarenceschools.org**

Due: January 31