**Bulloch Academy hall of fame nomination form**

 

Nominee’s Name:

First:

Last

Middle Maiden

Address City Zip

Home Phone Work Cell

This individual is being nominated for the following: (please check one below)

\_\_\_\_\_ Athlete \_\_\_\_ Coach \_\_\_\_\_ Outstanding Supporter

If nominating an Outstanding Supporter of Bulloch Academy Athletics, please use the back of this form to share your reasons for this nomination.

|  |  |  |
| --- | --- | --- |
|  | If this individual is being nominated for more than 2 sports please make a copy of this page |  |
|  | Sport #1 | Years- |
| State Level Recognition/Accomplishment (All-State, Records, State Championships) |  |
|  |  |
|  |  |  |
|  | Region Level Recognition/Accomplishments (All-Region, Region Championships) |  |
|  |  |
|  |  |
|  | Other Athletic Accolades: |  |
|  | Sport #2 | Years- |
| State Level Recognition/Accomplishment (All-State, Records, State Championships) |  |
|  |  |
|  |  |  |
|  | Region Level Recognition/Accomplishments (All-Region, Region Championships) |  |
|  |  |
|  |  |  |
|  | Other Athletic Accolades: |  |
|  |  |

Information required on person making the nomination:

First: Last

Address City Zip

Home Phone Work Cell

Email