Athletic Hall of Fame Official Nomination Form For Coach/Administrator/Community Member

Nominee:	
Nominee Home Address:	
Nominee Home Phone/Email:	
Years of Association with OTH	S:
List all positions held associated with	the athletic department:
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List all accomplishments of the nomin	nee related to the athletic department:
Nominee Place of Employment and Cu	urrent Title:
** Please attach a brief explanation of induction into the Old Town High Scho	of why you believe this individual to be deserving ool Athletic Hall of Fame.
Nominator Signature:	Date:
Nominator Phone/E-mail address:	