

**MARGARETTA HIGH SCHOOL
ATHLETIC HALL OF FAME
NOMINATION FORM**

Name of nominee _____

Address of nominee _____

Phone number of nominee _____

Name and address of closet relative (if nominee is deceased)

Phone number of relative _____

Circle the category that the person is nominated for:

ATHLETE

COACH

SCHOOL OFFICIAL

COMMUNITY MEMBER

Did the nominee graduate from Margarett High School? _____

If so, what year? _____ If not, explain why and list the year his/her class graduated _____

Sports the nominee lettered in and number of letters in each sport (if applies) _____

Honors and achievements (may include post-high school career. Use the back of this page if necessary)

Current occupation of nominee _____

Name of nominator _____

Address of nominator _____

Phone number of nominator _____

Date of nomination _____