

# City Of Glen Cove Hall of Fame Nomination Form

1. Nominee: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Age: \_\_\_\_\_

2. Sport or Category:
- A. Athletic Performer \_\_\_\_\_
  - B. Coach \_\_\_\_\_
  - C. Administrator \_\_\_\_\_
  - D. Manager \_\_\_\_\_
  - E. Promoter \_\_\_\_\_
  - F. Sponsor \_\_\_\_\_

3. Glen Cove Residency/Employment from \_\_\_\_\_ to \_\_\_\_\_

4. Level(s) of Participation \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

5. School and Class Graduated In: \_\_\_\_\_

6. Reasons for nomination: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Honors/Achievements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Nominated by: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Daytime Phone number: \_\_\_\_\_

Please attach any supporting materials (e.g. newspaper articles, awards, etc.) that will aid the committee in assessing your application.