2016 NOMINATION FORM
Springwater Sports Heritage Hall of Fame

Only Nominations received by May 2, 2016 will be considered

Copies/Information on Website	Mail Address, also Pickup/Drop-off	Library Pickup/Drop-off
springwatersportsheritage.ca	Springwater Sports Heritage Hall of Fame 2231 Nursery Road, Minesing ON, L0L 1Y2	Elmvale, Midhurst & Minesing

Nominator: (Anyone may submit a nomination for any person or team meeting the eligibility criteria)

If an Association, provide name _____

Nominator's Surname _____ First Name _____ Middle Name _____

Street & Number _____ Apt. # _____ City/Town _____ Postal Code _____

Home Phone _____ Work Phone _____ Mobile Phone _____ Email address _____

To the best of my knowledge I believe the information I am providing is accurate and I endorse this application for induction into the Springwater Sports Heritage Hall of Fame. Nominator Signature _____ Signature Date _____

Individual Nomination ☐ Athlete ☐ Builder

Nominee's Surname _____ First Name _____ Middle Name _____

Place of Birth _____ Birth Date _____ From _____ To _____ Time period in Springwater

☐ Deceased Date of Passing if deceased _____ Place of Resting if deceased _____

Family Contact Surname if deceased _____ First Name _____ Middle Name _____

Street & Number _____ Apt. # _____ City/Town _____ Postal Code _____

Home Phone _____ Work Phone _____ Mobile Phone _____ Email address _____

Team Nomination

Team Name _____ From _____ To _____ Time period as a team

Team Contact Surname _____ First Name _____ Middle Name _____

Street & Number _____ Apt. # _____ City/Town _____ Postal Code _____

Home Phone _____ Work Phone _____ Mobile Phone _____ Email address _____

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Highlights:

2016 NOMINATION FORM
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Narrative:

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Additional Information:

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