



HALTON HILLS SPORTS HALL OF FAME NOMINATION FORM

NOMINEE PERSONAL INFORMATION:

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

EMAIL: _____

PHONE: _____ ALTERNATE/BUSINESS: _____

BIRTHDATE: _____ PLACE OF BIRTH: _____

YEARS LIVING IN HALTON HILLS: _____

LOCAL SCHOOLS ATTENDED (if applicable): _____

SPORT: _____

NOMINEE CATEGORY:

ATHLETE TEAM BUILDER OFFICIAL MEDIA

(Additional page if needed)

ACCOMPLISHMENTS (Additional page if needed)

YEAR	LEAGUE/LEVEL (National, Provincial (Local)	ACHIEVEMENT (Awards, Honours Records, Championships)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER INFORMATION: (Additional achievements, expand on the accomplishments above, provide context or significance of achievements)

NOMINATOR INFORMATION:

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

EMAIL: _____

PHONE: _____ ALTERNATE/BUSINESS: _____

Please provide at least one reference in order to assist the selection committee in compiling information and/or assessing the nominee.

REFERENCE:

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____ POSTAL CODE: _____

EMAIL: _____

PHONE: _____ ALTERNATE/BUSINESS: _____

Completed forms can be e-mailed to the nominations committee chair:

herb_garbutt@hhsm.ca

Or mailed to:

Herb Garbutt
1 Willoughby Way
Georgetown, Ont.
L7G 6C3

For additional information, call Herb Garbutt, 647-200-2225.