2014
Amherst County Sports Hall of Fame
Nomination Form:

Visit our website: www.amherstcountysportshalloffame.com

Please Provide as Much Information as Possible

The Hall of Fame selection committee understands that the individual submitting this ballot may not know all of the requested information.

Nominee Name: (First, Middle, Last)

Current Address:_____

City, State, Zip Code:_____

Phone (Include Area Code):_____ Email:_____

Letter of recommendation:_____

_____

_____

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_____

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_____

Hall of Fame Nominee:_____
(First, Middle, Last)

Mail nomination to: **or** **Email to:**

Amherst County Sports Hall of Fame
PO Box 1497
Amherst VA. 24521

ACSHOF@comcast.net

Individual Submitting Nomination:

Name:_____

Address:_____

City, State, Zip Code:_____

Phone:_____ Email:_____

Signed:_____ Printed Name:_____

Date:_____

* **This application must be submitted on/before April 15th of the current year.**

* **All ballots will be retained by the Hall of Fame Committee.**

* **Please include with this ballot a brief letter of recommendation. (space provided with the nomination form).**

* **Please type or print clearly information for all appropriate application sections.**