Elmira Free Academy Hall of Fame

ATHLETE NOMINATION FORM

Date Submitted:				
Last Name:		First:		Maiden:
Street:		City:		State:
Zip Code:		County:		
Home Phone:		Work P	hone:	Cell Phone:
E-Mail:		School A	Attended:	
Years in High School	ol:	Year Gr	raduated:	
<u>E</u> .	MPHASIS IS ON	HIGH SC	CHOOL ACHIEV	EMENTS ONLY
Varsity Sports	No.	of Years		Years Completed
<u>Sp</u>	ecial Recognition	(League A	All Star-All State-A	All American, etc.)
Sport	Class	sification		Year
]	Established Record	ls (League	e, Sectional, State	e, National, etc.)
Classification	Sport		Year	Record

Comments on Individual Records:		
Primary emphasis is on High	School Achievements	
(Such as football-TD's; basketball se	coring, rebounds; baseball hitti	ng average, pitching, etc.)
Other pertinent information:		
Achievements Beyond High Schoo	l: (i.e. College, Prep School, Pr	rofessional, Career, etc.)
IF NO RECORDS ARE AVAILA	BLE, PLEASE TRY TO BE A	AS ACCURATE AS POSSIBLE
To the best of my knowledge, the a	bove information is correct:	
Last Name:	First:	Maiden:
Street:	City:	State:
Zip Code:	County:	
Home Phone:	Work Phone:	
Cell Phone:	E-Mail:	
Please return this application	by April 7, 2014 to the a	ddress below OR e-mail to
mciocco1@yahoo.com Elmira Free Academy		
c/o Tom Morrell		
933 Hoffman St. Elmira, NY 14901		