HOF Nomination Form



YOUR CONTACT INFORMATION

First Name		Last Na	ame	
Phone		Email		
CANDIDATE NAME				
First Name		Last Na	ime	
Phone		Email		
HOF CATEGORY (CHOOSE ALL THAT APPLY)				
Compe	titor Official	Pione	eer	
Would this candidate be recognized posthumously?				
No	Yes, family contact info			
HOW HAVE YOU SUBMITTED YOUR FULL *Nominations without statement will not be considered. Email Attached PDF Have you previously submitted this person		Attached Google Document Attached Word Document		
 Please use the below questions to help guide your full nomination. When did the candidate start skiing and what was the candidate's motivation to start skiing? What were the candidate's major placements and achievements at the state, regional, national and world level? What records did the candidate hold and when? What records did the candidate hold and when? Why do you think the candidate would make a good addition to the AWSA Midwest Water Ski Hall of Fame? 				
			Date Received	Yes / No

Signature

Date