

USAG Washington State Gymnastics Hall of Fame

Nomination Form

Nominee's

Name: _____

Category of

Nomination: _____

Nominee's significant verifiable achievements:

Description of Nominee which earns them special consideration:

Who were some of the nominee's peers at the time of their gymnastics career?

Your Name

Phone # : _____

Email: _____

Do you have any video of this nominee? : Yes___ No ___

Do you have an action photo of this nominee? : Yes ___ No ___

Should this individual be elected to the Hall, would you be available to present a (1) three minute speech, on their career, during the ceremony? Yes___ No ___

Your Signature _____ Date: _____

Please Return to the Hall of Fame Director
2905 Jahn Avenue NW #11, Gig Harbor, WA 98335

Or E-mail to:

nasagym@hotmail.com