HALL OF FAME

Nomination Application

Nominee Information

Name_____
(Last) (First) (Mi)

Address_____

City/State/Zip_____

Telephone_____

Nominated as Athlete _____ Volunteer _____Team or Team Member _____

Nominee's Accomplishments and Contributions (State years involved, awards or medals, activities, committees, duties, sports, achievements that only pertain to the Senior Olympics). Attach other pages, articles or pictures if necessary.

Nominator Information

Name_____

Address_____
(Street) (City/State/Zip)

Application must be postmarked, faxed or hand delivered by June 1, 2012 to the following:

Mississippi Senior Olympics
%Clinton Parks and Recreation Department
P.O. Box 156
Clinton, MS 39060
Phone: 601-924-6082 Fax: 601-925-6101