

CARY HIGH SCHOOL SPORTS HALL of FAME NOMINATION FORM

Year of Nomination	

I. NOMINEE INFORMATION

ADDRESS:STREET EMAIL ADDRESS: DATE of BIRTH:	CITY	MIDDLE STATE	NICKNAME ZIP CODE	
STREET EMAIL ADDRESS:	CITY		ZIP CODE	
EMAIL ADDRESS:		STATE	7IP CODE	
			ZII CODE	
DATE of BIRTH:				
		PHONE: ()	() WORK / CELL	
Is nominee a CHS graduate?		If YES , Years attending CHS: Year of Graduation: (Must have graduated at least 7 years prior to nomination)		
Name(s) of College(s) / Unive		Degree (Masters, Doctorate		
Nominated for contribution (Please check all which NOMINEE'S ATHL	apply)	CC	DACH DMINISTRATIOR DLUNTEER	
Please feel free to attach up	to five (5) additiona	l support pages about the	nominee. DATE(S)	
SPORT		ACHIEVEMENT	Participated	

NOMINEE'S OTHER ATHLETIC / COACHING ACHIEVEMENTS

College / University or Professional Athletics	ACHIEVEMENT	DATE(S) Participated
Floressional Atmetics	ACHIE V EIVIEN I	Participated
NOMIN	EE'S CIVIC / CHARITABLE ACTIVIT	IFS
	table activities indicative of exemplary citize	
1)	· ·	•
2)	,	
3)	6)	
II. STATEMENT		
DI		11
• •	rief statement on why this person would be	an excellent nominee for the
Cary High School Sports	nan of rame.	
III. SPONSOR INFORMAT	TION (Person Making Nomination)	
	,	
NAME:LAST	FIDET	MDDLE
	FIRST	MIDDLE
STREET	CITY STATE	ZIP CODE
EMAIL ADDRESS:		
DHONE: (
PHONE: ()	() WORK / CELL	
CICNATUDE.	WORKE, CEEE	

Please return this nomination form no later than June 30th of the year in which you wish the candidate to be considered for induction to:

CARY HIGH SCHOOL ATTN: ATHLETIC DIRECTOR / HALL OF FAME 638 WALNUT STREET CARY, NC 27511 FAX # (919) 460-3573