

OHPA HALL OF FAME NOMINATION FORM

NOMINEE INFORMATION

First Name _____ Last Name _____ Birth Date: ____/____/19____

Street Address _____ City _____ Zip Code _____

Number of Years an OHPA/NHPA Member: _____ (minimum of 10 years required)

Please list Horseshoe Club Memberships, past and present:

NOMINATION CATEGORY – Check the ONE Category to which you are nominating this person:

____ PLAYER – Anyone who has brought prestige to the sport of horseshoe pitching through outstanding performance on the courts.

____ PLAYER/ORGANIZER – Anyone who has performed well on the courts *and* has also become a worthy tournament director, promoter, organizer, or officer at the local, state, or national level.

____ PROMOTER/ORGANIZER – Anyone who, through his or her devotion to the sport, has made a significant contribution through time and effort to the advancement of the sport of horseshoe pitching in an administrative capacity, such as a promoter or organizer of events, or as an officer at the local state, or national level.

HORSESHOE HISTORY OF THE NOMINEE:

On separate pages, include the horseshoe pitching history of this person, from the beginning until now. To include a complete and accurate history, it may become necessary to contact family, friends, or even the person you are nominating! Note: If this person is being nominated as a PLAYER, or PLAYER/ORGANIZER you must also include their accomplishments on the court at the local, state, and/or national levels. If possible, include tournament names/dates of 1st or 2nd place finishes (check trophies), etc.

SUBMIT NOMINATION FORM:

This completed form must be received by the Hall of Fame Chairman* no later than March 1st of the year of nomination. Please include your name, mailing address, and phone number below in case the HOF Committee has any questions.

Your Name _____ Phone Number _____

Street Address _____ City _____ Zip Code _____

*Send completed nomination form to:

OHPA

PO Box 475

Hilliard, Ohio 43026