

**NOMINATION FORM FOR THE WOMEN'S HALL OF FAME OF SARASOTA-MANATEE
FOR SUPERIOR PERFORMANCE**

A nominee must have bowled in ten (10) Women's Championship Tournaments, unless injuries or illness has shortened her career, and must have won city recognition for her bowling ability.

FILL OUT THE FORM COMPLETELY - USE ADDITIONAL SHEETS IF NECESSARY

NAME OF NOMINEE: _____ PHONE NUMBER: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

NUMBER OF LOCAL CHAMPIONSHIP TOURNAMENTS PARTICPATED IN: _____

LIST ALL LOCAL CHAMPIONSHIP TOURNAMENTS WON, IF ANY, GIVE EVENT, YEAR & SCORE

LIST OTHER HONORS WON, SCORING ACCOMPLISHMENTS, ETC.

LIST HIGHEST AVERAGE: _____ SERIES (3 GAMES): _____ GAME: _____

IF ACTIVE, NUMBER OF LEAGUES PRESENTLY BOWLING IN: _____

OF YEARS BOWLED: _____

STATE ANY OTHER INTERESTING FACTS: _____

THIS FORM IS TO BE RETURNED NO LATER
THAN DEC. 15th

Charlotte Hiatt, Chairman
1055 Frances Avenue, Sarasota, FL 34232

SUBMITTED BY: _____
PHONE: _____
SIGNATURE: _____
E-MAIL ADDRESS _____