

Official  
Nomination  
Form



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Form

## African American Legacy Project's Sports Hall of Fame

(please print)

I wish to place in nomination the name of : \_\_\_\_\_

For membership in the African American Legacy Project's Sports Hall of Fame as:

*(Check appropriate category — only one nomination per form)*

\_\_\_\_\_ 1. Athlete      \_\_\_\_\_ 2. Coach      \_\_\_\_\_ 3. Distinguished Citizen      \_\_\_\_\_ 4. Posthumous

\_\_\_\_\_ Sport(s) Excelled

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Name of School

\_\_\_\_\_

Nominee's address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Nominee's phone: \_\_\_\_\_

In support of the nomination, please attach a narrative summary of his/her achievements in athletics. Please list the sport(s); years played, honors won; records set; point scored; averages, etc.  
Do not submit more than a two page narrative summary of your nomination.  
Newspaper clippings and letters of support are encouraged!

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PLEASE SEND YOUR ORIGINAL NOMINATION FORM TO:

The African American Legacy Project  
Sports Hall of Fame  
1326 Collingwood Blvd  
Toledo, OH 43604

or email information to:

[info@africanamericanlegacy.org](mailto:info@africanamericanlegacy.org)

**DEADLINE FOR SUBMISSION: \_\_\_\_\_**