

Team Nomination Form

CONTACT INFORMATION (PERSON DOING THE NOMINATING)

Name _____ Phone ____ - ____ - _____

Address _____ City _____ St _____ Zip _____

Email _____

Signature _____ Date _____

NOMINATION INFORMATION

Team _____

Sport, year, and team members:

Win/loss record, WIAA tournament accomplishments, and/or school records set by the team:

Describe why this team should be selected:
