

Sports Hall of Fame Nomination Form

Nominator:

Name_____

Address_____

City_____Province_____Postal Code_____

Phone (home)_____Phone (cell)_____

Email_____

Signature_____

Nominator:

Name_____

Address_____

City_____Province_____Postal Code_____

Phone (home)_____Phone (cell)_____

Email_____

Signature_____

Deadline for nominations is October 1 for consideration in the following year

Please return this form to:

Mission Parks, Recreation & Culture Department

Mission Leisure Centre

7650 Grand Street Mission, BC V2V - 3T3

Email: leisureservices@mission.ca

Phone: 604-820-5350