



# Noblesville High School Athletic Hall of Fame Nomination Form

Name of Nominee: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Current Phone Number: \_\_\_\_\_

Nomination Category: Athlete \_\_\_\_ Coach \_\_\_\_ Contributor \_\_\_\_

*If Nominee is Deceased:*

Name of Spouse or Closest Living Relative: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Year(s) Nominee Graduated/Coached/Contributed to NHS: \_\_\_\_\_

NHS Achievement(s) Summary (Please list only achievements that took place while nominee was a Noblesville High School student/coach/contributor): \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

Individual Submitting Nomination:

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to: Noblesville High School Hall of Fame  
c/o NHS Athletic Office  
18111 Cumberland Road  
Noblesville, IN 46060