

Watkins Glen Athletic Hall of Fame – Benefactor Application

NAME OF NOMINEE _____ **DATE SUBMITTED** _____

The nominee must have contributed significant time and interest in the overall athletic program at Watkins Glen to qualify for the Hall of Fame.

Benefactor at Watkins Glen Schools:

Please list significant contributions this nominee has made to students and the interscholastic athletic program at Watkins Glen that would support their nomination to the Hall of Fame.

Please list the professional achievements and/or community involvement of the nominee

Please add any additional comments you feel would distinguish this nominee from others in the space below.

Nominator Information

Name _____

Address _____

Phone (Home) _____

Phone (Cell) _____

Email _____

Relationship to Nominee _____

Nominee Information (current)

Name _____

Address _____

Phone (Home) _____

Phone (Cell) _____

Email _____

For consideration in the current year, this nomination must be returned by the end of November.

Athletic Director
Watkins Glen Central School District
301 12th Street
Watkins Glen, New York 14891

*Please type or print all information on this application. Use the back of this form for additional information and attach all supporting documentation.