

OHIO HOCKEY

Hall of Fame Nomination Form

The Ohio University Hockey Hall of Fame recognizes selected outstanding players and coaches.

Nominee Information:

Name _____ Nickname (if any) _____

Current Address _____

Telephone (____) _____ Fax (____) _____ Email _____

If deceased, date of death _____ Next of Kin Name and relationship _____

Address _____

Telephone (____) _____

Did the Player Graduate from Ohio University? Yes/No What Degree did he receive? _____

In which category is the nominee to be considered for nomination? (circle one)

Player

Coach

Meritorious Service

If "Player", Position Played? (circle one)

Forward

Defense

Goalie

Points/Stats

Season ____ - ____ Goals _____ Assists _____ GAA _____

Season ____ - ____ Goals _____ Assists _____ GAA _____

Season ____ - ____ Goals _____ Assists _____ GAA _____

Season ____ - ____ Goals _____ Assists _____ GAA _____

Was Player a Captain? Years _____ Assistant Captain? Years _____

Was Player an Allstar? Years _____ (First team, Second team)

Was Player a League MVP? Years _____

Please list any other significant achievements (additional attachments are strongly encouraged).

Nominated By

Name _____

Current Address _____

Telephone (____) _____ Fax(____) _____ Email _____

Signature _____ Date _____