

GLOUCESTER CITY HIGH SCHOOL ATHLETIC HALL OF FAME NOMINATION FORM

(Nominees must have graduated prior to 2007 to be considered)

1.) Name of Nominee: _____

Please circle: Living Deceased

2.) Category of nomination (please circle one)

Athlete Coach Team

3.) Nominee's Year of Graduation or Year of Team (if known) _____

4.) Nominee's Qualifications (reasons for your nomination)

5.) Way to Contact Nominee or Family (if known)

6. Nomination Submitted by:

Address:

Phone:

Please return form to:

Gloucester City High School
C/O Principal Sean Gorman
1300 Market Street
Gloucester City, NJ 08030