



ASHLAND COUNTY SPORTS HALL OF FAME

P.O. BOX 731
ASHLAND, OHIO 44805

DATE: _____

NOMINATION FORM ASHLAND COUNTY SPORTS TEAMS OF THE PAST

NAME OF TEAM: _____

YEAR OF EXCELLENCE: _____ TEAM RECORD: _____

HEAD COACH: _____

ASSISTANT COACHES: _____

TEAM CAPTAINS: _____

KEY PARTICIPANTS AND WHY?

WHAT ARE THE ACCOMPLISHMENTS OF THIS TEAM?



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IF YOU WANT PLEASE INCLUDE TEAM AWARDS, GAME AND SEASON STATISTICS. ALSO NEWS ARTICLES AND TEAM PICTURE WHICH WE CAN RETURN TO YOU AFTER THE INDUCTION.

NAME OF PERSON FILLING OUT FORM: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____