

SPEARFISH HIGH SCHOOL
ATHLETIC HALL OF FAME NOMINATION FORM

Nominee: _____ Year Nominated: _____

Name _____
Last (Maiden) First Middle Nickname

Address _____
Street City State Zip
Email _____ Phone Number _____

Dates Attended Spearfish High School From _____ to _____

Dates Coached at Spearfish High School From _____ to _____

This person is being nominated based on their _____ Athletic Participation
_____ Coaching
_____ Contributions to SHS Athletics

On a separate sheet of paper thoroughly address the following items that apply to your nominee:
(Please be as thorough as possible).

- Sports coached or participated in
- Other activities in which they were involved
- Honors and recognitions received in high school for participation / coaching
- Post-high school participation in athletics / coaching
- Contributions made to Spartan athletics

Include a statement on why this person should be included in the Hall of Fame.

NOMINATOR: _____

Address: _____
Street City State Zip

Email _____ Phone Number _____

Please mail completed nomination to:

Spearfish High School Athletic Hall of Fame
525 E. Illinois
Spearfish, SD 57783
Phone (605) 717-1206
Fax (605) 717-1211