

TEAM NOMINATION FORM

for Induction Into the 2023 Class

Lexington African-American Sports Hall of Fame, Inc.

Please complete this nomination form thoroughly. Be as specific as possible with factual information. We are primarily interested in special honors, awards, noteworthy records, and significant achievements along with the years these accomplishments were earned.

Name of person submitting the nomination _____

Street Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Team Name _____

Sport _____ Year _____

Scholastic (check one)

☐ High School

☐ College

Head Coach _____

Non-scholastic/Recreational (check one)

☐ Recreational League

☐ Semi-Pro

☐ Other _____

Head Coach _____

Team achievement(s) or why this team is being nominated for induction into the Lexington African-American Sports Hall of Fame, Inc.

Where Legends Shine

Team Members

Living

Deceased

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

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Team Members

Living

Deceased

11. _____
12. _____
13. _____
14. _____
15. _____
16. _____
17. _____
18. _____
19. _____
20. _____

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Submitted By: _____

Date _____

[SUBMIT]