

St. John's Regatta Committee Hall of Fame

Nominator's Name: _____

Nominator's Address: _____

Postal Code: _____

Nominator's Phone Number: (W) _____ (H) _____

Date of Nomination: _____

Nominator's Signature: _____

Note(s):

(i) If nomination is on behalf of a group, association etc. please specify: _____

(ii) The individual is not eligible for induction into the Royal St. John's Regatta Hall of fame if he or she has been previously inducted as either a rower/crew, coach/coxswain, or a builder. An individual may only be inducted once.

(iii) To be considered, this nomination must be typed

Mail the Completed Nomination form to:

Secretary Selection Committee Hall of Fame
Royal St. John's Regatta Committee Hall of Fame
P.O. Box 214
St. John's Newfoundland
A1C 5J2

PART A

CATEGORY: Rower/Crew _____ Coxswain/Coach _____ Builder _____

NOMINEE'S NAME: _____

NAME COMMONLY CALLED _____

NOMINEE'S ADDRESS (including postal code)

NOMINEE'S PHONE # - Residence _____ Business _____

DATE OF BIRTH _____

PLACE OF BIRTH _____

LENGTH OF RESIDENCY IN NEWFOUNDLAND _____

DATE OF DEATH (if deceased) _____

NEXT OF KIN _____

ADDRESS OF NEXT OF KIN

NEXT OF KIN PHONE # - Residence _____ Business _____

NOMINATOR'S NAME: _____

NOMINATOR'S ADDRESS (including postal code)

NOMINATOR'S PHONE # - Residence _____ Business _____

DATE OF NOMINATION _____

NOMINATOR'S SIGNATURE _____

