



OCONOMOWOC HIGH SCHOOL ATHLETIC HALL OF FAME

– Special Category Nomination Application –

Date: _____

Name of Nominee: _____

Nominee maiden name, if applicable: _____

Nominee Current Address: _____

Nominee Current Home Phone: _____ Cell Phone: _____

Nominee Email: _____

OHS teams participated with: _____
(Include year participated)

1. _____

OHS awards, championships, etc: _____

Other OHS recognitions: _____
(not included above)

Post-High School information – college athletics, any other athletic information/participation:

Nominators Name: _____

Nominators Address: _____

Nominators Home Phone: _____ Cell Phone: _____

Nominators Email: _____

Please return the application to the OHS Athletic Office
Email to OHSAthletics@oasd.org or mail to 641 E. Forest Street, Attn: Athletic Department, Oconomowoc, WI, 53066