

COMPETITION NOMINATION FORM

NAME _____

ADDRESS _____

PHONE/CELL _____

EMAIL _____

TYPE OF RACING

MANUFACTURER OF SLED

CAREER SPAN/YEAR RETIRED

CHAMPIONSHIPS AND TITLES/USE ADDITIONAL SHEETS IF NECESSARY

CAREER HIGHLIGHTS

NOMINATED BY/INCLUDE ADDRESS/PHONE/EMAIL

TO SEE THE CURRENT INDUCTEES PLEASE SEE OUR WEBSITE
@WWW.SNOWMOBILEHALLOFFAME.COM



RETURN TO: SHOF, PO BOX 720, ST. GERMAIN, WI 54558
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INFO@SNOWMOBILEHALLOFFAME.COM