CYO ATHLETIC OFFICE

HALL OF FAME NOMINATION FORM

Must be returned by August 8 , 2008 to:
Attn: Christopher Farroni, CYO Athletic & Camping Office,
7911 Detroit Ave., Cleveland, Ohio 44102

Nominee must have made significant contributions to the CYO athletic programs as a player, coach, parish athletic director, clergy, league commissioner, or other member of our community whose accomplishments have been of the highest caliber over an extended period of time.

PERSON SUBMITTING NOMINATION: _____
Relationship to Nominee: _____
Nominator's Address: _____ Phone: (H) _____
_____ (W) _____
E-Mail: _____

NAME OF NOMINEE: _____ Living or Deceased
PARISH: _____
How can we contact nominee or nearest surviving relative:
NAME: _____
ADDRESS: _____ PHONE #: _____
_____

CYO Involvement

Year(s) Parish Activity

_____

_____

_____

_____

_____

_____

_____

Community Involvement

Year(s) Organization Activity

_____

_____

_____

Family Information

Spouse: _____

Children: _____

Use additional Paper if needed. Please return this form by August 8, 2008 to: CYO Athletic Office, 7911 Detroit Avenue Cleveland, OH 44102, Fax – 216.334.1270

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NAME OF NOMINEE: _____

Please write a brief narrative as to why you feel this individual should be inducted into the Cleveland CYO Hall of Fame. Include what his or her most significant contribution has been to the Cleveland CYO Programs.

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