Millersport High School Athletic Wall of Fame

Nomination for Induction

Please complete this form in its entirety and return it to: Athletic Board, Athletic Wall of Fame, Athletic Office, Millersport High School, 11850 Lancaster Street, Millersport, Ohio 43046. This application must be received by the Athletic Board. Beginning with the 2024-25 school year, nominees must have graduated at a minimum of 5 years prior for consideration.

Candidate's NamePhone (Phone ()
Address		
City	State	Zip
Sport (s) for which the candidat	e is being nominated:	
Years of participation (example	: 1976-1980):	
MHS ATHLETIC HISTORY – List b	elow the candidate's VARSI	TY playing experience in all sports.
Sport:		Years:
Accomplishments:		·
Sport:		Years:
Accomplishments:		
Sport:		Years:
Accomplishments:		

Sport:	Years:
Accomplishments:	
	
COMMENTS: Please explain why you think this of Millersport High School Athletic Wall of Fame, p	
are necessary.	hease attach any additional materials you trink
	
Your name:	
Address:	
City, State, Zip	
Contact numbers:	
Your signature:	