IOWA SENIOR OLYMPICS HALL OF FAME AWARD

NOMINATION FORM

Name of person being nominated _____

Reasons why this person is being nominated _____

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Signature of person making the nomination _____

Date of nomination _____

To be completed by Iowa Senior Olympics:

Number of years of participation _____ Record holder _____

Number of gold medals won _____ Contributor_____ _____

Number of total medals won _____