

## PEARL RIVER HIGH SCHOOL SPORTS HALL OF FAME

Nominee:			
(Last Na	me)	(First Name)	(Middle)
Current Address:			
Phone Number: *If deceased, please		Date Submitted: dress and phone number of family member.	
Year of Graduation from HS:		College/University:	
positive impact upo Include varsity spo	on the athletic prog rts played, dates, le	l of the significant accomplishments of the no grams of Pearl River High School. Please be as etters earned, honors won, coaches played fo d/or professional accolades and accomplish	s specific as possible. r, etc. Additionally,
Nominating Perso	n:		
(Last Name)	(First Name)		
(Address)		(Email)	
(Phone Number)		Relationship of Person Nominating: (circle one)	Self Coach Parent Community Member Other:
*Please submit to:	-		
Or email:	Todd Santabarbasat@	ara, Director of Athletics pearlriver.org	