MARYLAND SOCCER HALL OF FAME NOMINATION

I WISH TO NOMINATE THE FOLLOWING INDIVIDUAL FOR THE MARYLAND SOCCER HALL OF FAME:

NAME: _____ _____ _____
(FIRST) (M.I.) (LAST)

1. PLAYING EXPERIENCE: DESCRIBE THE TEAM(S), YEARS PLAYED, POSITIONS, ACCOMPLISHMENTS, I.E. GOALS SCORED, ASSISTS, SAVES, CONTRIBUTION TO THE TEAM, KEY PLAYS AND HONORS/AWARDS FOR EACH LEVEL OF COMPETITION

AMATEUR:

HIGH SCHOOL:

COLLEGE:

PROFESSIONAL:

NATIONAL/ OLYMPIC :

2. COACHING EXPERIENCE: DESCRIBE THE TEAMS COACHED, YEARS, WIN/LOSS RECORD, ACCOMPLISHMENTS, HONORS/AWARDS

3. REFEREE EXPERIENCE: DESCRIBE THE LEVELS OF OFFICIATING, YEARS, ACCOMPLISHMENTS, HONORS / AWARDS

4. LEADERSHIP AND/OR ADMINISTRATIVE POSITIONS: DESCRIBE THE POSITIONS HELD, YEARS, ACCOMPLISHMENTS, HONORS/AWARDS

5. OTHER SIGNIFICANT CONTRIBUTIONS TO THE GAME OF SOCCER, E.G. SPONSOR, PROMOTER, SPECTATOR, DELEGATE, SPORTS WRITER, ORGANIZER, ETC.

USE THE REVERSE SIDE OF THIS FORM OR ATTACHMENTS TO PROVIDE ADDITIONAL DETAIL IF NECESSARY.

ATTACH ANY DOCUMENTS THAT WILL HELP TO SUPPORT THIS NOMINATION.
IT IS NOT MANDATORY THAT THIS PARTICULAR FORM BE USED. OTHER FORMATS OR RESUMES ARE ACCEPTABLE PROVIDED THAT SUFFICIENT DETAIL IS PROVIDED. ANY INFORMATION PROVIDED SHOULD BE VERIFIABLE.

SUBMITTED BY_____ADDRESS _____TEL. NO._____

FORWARD THIS FORM TO: THOMAS M. BAILEY, SECRETARY
OLD TIMERS SOCCER ASSOCIATION OF MD, INC.
11 STRAWBERRY RD
NEW FREEDOM, PA 17349-9495