BURLINGTON SHAG CLUB, INC. HALL OF FAME OFFICIAL NOMINATION FORM

Date:				_
Name of Nom	inee:			
CRITERIA FO	R NOMI	NATION: (Refer to Article VIII -J of the Bylaws):		
Signed:				
Signed.		BSC Member making nomination	Date	9
1 st Endorsem	ent:			
		Must be BSC Current or Past President	Date	e
2 nd Endorsem	nent:			
		Must be BSC Current or Past VP/Secretary/Tre	easurer Date	e
3 rd Endorsem	ent:			
		Any BSC Current Member	Dat	9
NOTE:		nation must be made on this form by October 1 st additional sheet(s) if necessary. Mail to:	directly to the Hal	l of Fame Chairperson.
		1	Burlington Shag Club Hall Of Fame Chairperson	
			P O Box 1174	
			Burlington, Nc	∠ <i>1 </i>

Revised 06/15/2007