



Please read the enclosed qualifications sheet carefully, then complete all known information on this three-part form. If you are not the nominee but are submitting the nominee, please fill out your name, address and phone number at the top of page 3.

## BIOGRAPHICAL INFORMATION

Name of nominee \_\_\_\_\_ Birth date \_\_\_\_\_

States and provinces of residence \_\_\_\_\_

Current or last known address \_\_\_\_\_

Phone No. \_\_\_\_\_

Year first registered \_\_\_\_\_ Last year registered \_\_\_\_\_ No. of Grands \_\_\_\_\_

Date and place of death if deceased \_\_\_\_\_

A) ALL-AMERICA RECORD: List year, name of team (men's, women's, etc.) and placement (1<sup>st</sup> or 2<sup>nd</sup>)

| YEAR | NAME OF TEAM | YEAR | NAME OF TEAM | YEAR | NAME OF TEAM |
|------|--------------|------|--------------|------|--------------|
|      |              |      |              |      |              |
|      |              |      |              |      |              |
|      |              |      |              |      |              |
|      |              |      |              |      |              |
|      |              |      |              |      |              |

B) MAJOR TROPHIES WON: List Grand American wins first, then zone or satellite, then state or province

| NAME OF SHOOT | LOCATION | NAME OF RACE AND TITLE WON | SCORE | YEAR |
|---------------|----------|----------------------------|-------|------|
|               |          |                            |       |      |
|               |          |                            |       |      |
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|               |          |                            |       |      |
|               |          |                            |       |      |
|               |          |                            |       |      |

Nominee: \_\_\_\_\_

| NAME OF SHOOT | LOCATION | NAME OF RACE AND TITLE WON | SCORE | YEAR |
|---------------|----------|----------------------------|-------|------|
|               |          |                            |       |      |
|               |          |                            |       |      |
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|               |          |                            |       |      |
|               |          |                            |       |      |
|               |          |                            |       |      |

C) OTHER MAJOR TRAP ACCOMPLISHMENTS (such as records set, high averages, etc.)

| YEAR | YEAR |
|------|------|
|      |      |
|      |      |
|      |      |
|      |      |
|      |      |

D) ATA OFFICES HELD

| YEAR | POSITION HELD | YEAR | POSITION HELD |
|------|---------------|------|---------------|
|      |               |      |               |
|      |               |      |               |

Name, address & phone # of person submitting: \_\_\_\_\_

Nominee: \_\_\_\_\_

E) MAJOR CONTRIBUTIONS TO THE ATA:

F) ANY OTHER ACCOMPLISHMENTS OF THE INDIVIDUAL (such as other sports halls of fame, honors bestowed)

If more space is needed for any of the sections on this form, please use the space below and indicate which section (A, B, C, etc.) applies. You may add additional sheet(s).

**Mail to: TRAPSHOOTING HALL OF FAME, PO Box 519, Sparta, IL 62286  
ATTENTION: BIOGRAPHICAL COMMITTEE CHAIRMAN**