

MANITOBA BASEBALL HALL OF FAME SPECIAL CATEGORY NOMINATION FORM

Nominee: _____

Classification: Single Year Team Group of Individuals Individual

Nomination: (add additional page if desired)

Description of Group or Name of Individual:

Achievements:

Group Contact Person: Name _____
Phone _____
Email _____
Postal Address _____

Date: _____ Submitted by _____ Phone _____
Email address of nominator _____

**Mail Nominations to Murrak Zuk, Box 158, Souris, MB R0K 2C0 or email to
murzuk@mts.net**

Deadline for nominations: August 15