Iowa High School Baseball Coaches Association Hall of Fame Umpire Nomination Form

Nominee's Name	(LAST)		(FIRST)				(MIDDLE)		
Home Address									
City			State			Zip			
Cell Phone			Work Phone						
E-Mail Address									
District in which	Nominee Resides:	NE	W	NW	SW	С	SC	NC	SE
	officiated during reg								
Number of years of	of officiating							_	
Number of years a	a member of the lowa	a High S	chool B	aseball C	Coaches A	Associa	tion		
Athletic Conference	es Officiated in:								
**									
**									
**									
Umpiring Awards r	received:								
**									
**									
**									

Offices or Committees held within the IHSBCA:

**			
**			
**			
IHSAA Classification:			
IHSAA Tournament Experience:	Districts		
	Sub-State _		
	State		
IHSBCA All Star Series worked:			
IHSBCA Clinics attended:			
Nominating Person		-	
Home Address		City	_ Zip
Your Cell		School/Work Phone	
Your reason for nominating condidate:	(attach avtr	a pagaa aa paadad)	
Your reason for nominating candidate:	(allach extra	a pages as needed)	
**			
**			
**			

Please include any evidence of above (Pictures, articles, news clippings, etc.)

Letters of recommendation are encouraged when completing the nomination process.

Return this form to:

Lee Toole 301 Wildwood Road Council Bluffs, Iowa 51503 **Fax:** 712-366-8324 **E-Mail:** toolehome@hotmail.com