

EVARTS HIGH SCHOOL ALUMNI AND SCHOLARSHIP ASSOCIATION

Evarts, Kentucky 40828

Sports Hall of Fame Questionnaire

Name _____ Class Year _____ Birthday _____

Address _____ Telephone _____

Sports Played at EHS (including years): College(s) Attended (include sports played):

Sports Honors While at EHS (such as All-County, All-State, Team Captain, etc.):

Please describe your greatest moment while participating in sports at EHS:

Nominations must be turned in no later than July 1 to the address below. If possible, please include copies of newspaper clippings, awards, etc.

Evarts HS Alumni and Scholarship Association
PO Box 782
Evarts, KY 40828

I will ___/will not ___ be attending
the 20__ reunion.

(Sports Hall of Fame Nominee)