



2006 Hall of Fame Banquet

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

I will attend the "H" Association Athletic Hall of Fame Banquet at a cost of \$20 per adult and \$10 per child (11-and-under) on October 14, 2006. The reception begins at 5:00 p.m. in Seiberling Gymnasium with dinner at 6:00 p.m. Complete the reverse side for credit card charges or send checks (made payable to Heidelberg College) to: Athletic Hall of Fame, Heidelberg College, 310 E. Market Street, Tiffin, OH 44883.

Number of Reservations: Adult _____ Child _____ Amount Enclosed \$ _____

Please return no later than Friday, October 6, 2006.



Hall of Fame Nomination Form

Nominee/Team _____
Last First Middle Nickname

Address _____
Street City State Zip

Degree _____ Major _____ Graduation Year _____

College Athletic Participation _____

Explain why you feel he/she is deserving of the honor of being selected to the Heidelberg Athletic Hall of Fame.

Submitted By _____ Date _____

Address _____
Street City State Zip

Please fold and return with postage paid endorsement on back!



Credit Card Payment

Credit Card Authorization (circle one): Visa MasterCard Discover AMEX

Name: _____

Card Number: _____ Exp. Date: _____

Signature: _____ Amount: _____



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HEIDELBERG COLLEGE
310 E MARKET ST
TIFFIN OH 44883-9932

