**AYLF/AYLUS HALL OF FAME**

**Nomination Form**

**Nominee Information:**

|  |  |
| --- | --- |
| Last Name |  |
| First Name |  |
| Branch Name |  |

Description of Nominee’s Story (Max 250 words)

|  |
| --- |
|  |

**Nominator Information:**

Branch Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email this form to: aylfus@gmail.com by the submission deadline (June 30)