



EAST COAST ENDURO ASSOCIATION  
HALL OF FAME  
NOMINATION FORM

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Nominee Name: \_\_\_\_\_

Current Position of Nominee: \_\_\_\_\_

Home Address of Nominee: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Is the Nominee Living/Deceased? (Circle one)

Club nominee was a member of/administered/supported (if applicable) and the number of years involved. (Please specify also the years the nominee was affiliated with the Association):

Special contributions/accomplishments, while involved with the ECEA, during his/her years with the Association: \_\_\_\_\_

Reasons for nomination: (please include summary of why you feel this person(s) should be considered for the ECEA Hall of Fame. Attach additional statement if necessary.)

Other person(s) to contact for more information about the nominee. Include contact information:

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Please send completed form to:

ECEA Secretary  
101 Rt. 541 Bypass  
Hainesport, NJ 08036

Or via email at: [ecsa.secy@verizon.net](mailto:ecsa.secy@verizon.net)