



NOMINATION FORM

Nominee's name: _____ Years of participation: _____

Full Address: _____

Team played for or affiliated with: _____

Please explain in as much detail as possible why you believe this nominee should be considered for induction into the Cape Cod Baseball League Hall of Fame. Please include as much factual data as possible including honors attained and statistical information. Please use additional paper if necessary.

Please submit this form to any member of the CCBL Hall of Fame Committee, or forward to Paul A. Galop, Chairman, 34 Horizon Drive, Chatham, MA 02633 (FAX 508-945-1923 or e-mail at pgalop@comcast.net). The deadline is February 15, 2008.

Nominated by: _____ Date: _____

Full Address: _____

Signature: _____ Phone: _____