



BASL

New York City's Gay, Lesbian, Bisexual and Transgender Softball League

Hall Of Fame Nomination Form



Nominee:

First Name / Last Name

Address (if living):

Number / Street / Apt.

City / State / ZIP

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Phone

Email

Seasons in the BASL (minimum of 10 seasons):

Contributions as a Player:

Contributions to the BASL as a whole:

Other Comments:

We strongly recommend that you include a photograph of your nominee and any other information that you feel will help the BASL Hall of Fame in its voting.

BASL Nominator's signature

Date

BASL Nominator's name – please print