

## **THE ONTARIO PROVINCIAL TRAPSHOOTING ASSOCIATION**

www.ontariotrap.com info@ontariotrap.com

OPTA Mailing Address: 176 St. Vincent Street, Sarnia, ON N7T6J9

## **Ontario Hall of Fame Nomination Form**

Please note this is a template only, completing all items noted is not mandatory; however, it is best to complete it with as much detail as possible, even items not listed here.

with as much detail as possible, ev	ven items not listed here		
Nominee's Name:		Date of Birth:	_
ATA #			
ATA ACCOMPLISHMEN	TS		
1st ATA targets shot in			
1st ATA 100 Straight singles	in (place)	in (year)	
1st ATA 200 Straight singles	in (place)	in (year)	
1st ATA 100 Straight doubles	s in (place)	in (year)	
		in (year)	
		in (year)	
ATA "AA27AA" Pin in (place	)	in (year)	
ATA "AAA27AAA" Pin in (pla	ace)	in (year)	
ATA Grand Slam in (place) _		_ in (year)	
Number of ATA Targets Sho	t at time of nominati	on	
ATA Delegate: Number of T			
Position	_in (year)		
Position	_in (year)		
Position			
ATA Past President: Year(s)			
<b>GRAND AMERICAN/SA</b>	<b>TELLITE GRAND</b>	ACCOMPLISHMENTS	
,			
ATA Titles: Number of Tim	es		
Disciplinei			
Disciplinei			
Discipline i			

Discipline	in (year	·)			
	in (year				
	in (year				
ONTARIO ACCOM	IPLISHMENTS				
Ontario Provincial Tit	tles: Number of Time	es			
Discipline					
<u> </u>					
Ontario Provincial Hi	<u> </u>				
Discipline					
Discipline					
Discipline	in (year)				
Discipline					
Discipline					
Discipline	in (year)	<del></del>			
Ontonio Duorrin sial All	l Ctou Tooms, Naveck on	of Times			
Ontario Provincial All					
1st or 2nd Team					
1st or 2nd Team					
1st or 2nd Team	Place	in (year)			
1st or 2nd Team 1st or 2nd Team					
1st or 2nd Team					
OPTA Grand Slam in (					
OPTA Provincial Reco			iı	2	
(year)	inus. (ii aliy)		11	.1	
(year)	_				
OPTA Directorship: N	lumber of Times				
Position					
CANADIAN ACCO	MPLISHMENTS				
Canadians Titles: Nur					
Discipline	in (year)				
4					

CTA Directorship: N	umber of Times		
Position	in (year)		
Position	in (year)		
Position	in (year)		
LOCAL CLUB AC	COMPLISHMENTS		
Directorship: Numb	er of Times		
Position	in (year)		
Position	in (year)		
Position	in (year)		
	nber of Times		
Year			
Year			
Year			
DETAILED WRIT	TE UP OF SHOOTER O	R CONTRIBUTER	

## SHOOTER OR CONTRIBUTOR PHOTOGRAPH

Full Size Color Photograph: EMAIL HI-RES IMAGE TO "info@ontariotrap.com"

## HALL OF FAME NOMINATION

I, (full name)	, a member of the OPTA and ATA in good				
standing, hereby nominate the p	erson named above for entry into the Ontario Provincial Trapshoot	ing			
Association Hall of Fame as a (s	nooter and/or contributor)				
Date:					
Signature:	<del></del>				
Five required additional OPTA 1	nembers' signatures supporting nomination:				
1. Name:	Signature:				
2 Name:	Signature:				
3. Name:	Signature:				
4. Name:	Signature:				
5 Name:	Signature:				
	RIGINAL NOMINATION TO THE SECRETARY.				
THIS NOMINATION MUST BE A	CCOMPANIED BY A HIGH RESOLUTION PHOTOGRAPH OF				
THE NOMINEE'S CONSENT. IF N	IORE SPACE IS REQUIRED, PLEASE ATTACH ADDITIONAL				
SHEETS.					