

Email:

1. Candidate Information



OADG HALL OF FAME INDUCTEE NOMINATION FORM

Any OADG member may nominate a person to be inducted into the OADG Hall of Fame on the OADG website.

Name of Candidate: Address: City/Town: Postal Code: Phone:

Place of Birth: _				
Date of Birth:				
Date of Death (if a	pplicable); _			

Candidate Family Member Contact (if available):

Name:	
Address:	
City/Town:	
Postal Code:	
Phone:	
Email:	





OADG HALL OF FAME INDUCTEE NOMINATION FORM

2. Nominator Information

	Name of Nomi	nator(s) / Organizations(s):						
	Nominator Cor	ntact:						
	Address: _							
	City/Town: _							
	Postal Code:							
	Phone:							
	Email:							
3.	Candidate's Co	ontributions:						
Ide	Identify the candidate's contributions to the sport of dressage to either the OADG and/or the surrounding area:							
Ide	ntify the candid	ate's organizational involvement and leadership roles:						





OADG HALL OF FAME INDUCTEE NOMINATION FORM

4.	Signatures of Nominator(s):							
	Date Submitted:							
	Forward Nomination to:							
	Electronic copies are preferred and can be emailed to president@ottawadressage.ca .							
	However, hard copies will be accepted. Please contact the OADG President by the phone n	umber listed at						

Please include at least one photo of the candidate.

<u>https://ottawadressage.ca/contact/</u> to obtain the mailing address.