

# Roger Bacon Hall of Fame Nomination Form

Nominee \_\_\_\_\_ Maiden Name (if applicable) \_\_\_\_\_

Year of Graduation \_\_\_\_\_ E-mail (if known) \_\_\_\_\_

Address (if known) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # (if known) \_\_\_\_\_

Sports Played \_\_\_\_\_

Athletic Accomplishments at Roger Bacon/Our Lady of Angels

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Athletic Accomplishments post Roger Bacon/Our Lady of Angels

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ROGERBACON  
HIGH SCHOOL

Nominator's Name \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Date \_\_\_\_\_

Please mail this entire form into the school at 4320 Vine St. Cincinnati, OH 45217  
**OR** email/scan to Steve Rossi at [ssossi@rogerbacon.org](mailto:ssossi@rogerbacon.org)