

VIRGINIA SHAGGERS HALL OF FAME NOMINATION FORM FOR CLASS OF 2025

Please be sure to obtain permission from the person you wish to nominate and please nominate persons who intend to honor their induction by being an active member. According to our Bylaws at the time of this nomination, nominees must be (1) at least 50 years of age; (2) a resident of the State of Virginia; and (3) have been a member in good standing of an ACSC-associated shag club for at least five (5) years preceding their nomination. PLEASE PRINT ALL INFORMATION LEGIBLY.

Name of Nominee \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_ VA

Preferred Phone # \_\_\_\_\_ home ( ) cell ( ) Alt Phone \_\_\_\_\_ home ( ) cell ( )

Email \_\_\_\_\_ (PLEASE print clearly)

I nominate \_\_\_\_\_ as a candidate for selection for membership in the Virginia Shaggers Hall of Fame and, in so doing, I attest that the information is current and correct to the best of my knowledge.

**Nominating Hall of Fame Member's Name:** \_\_\_\_\_ (Print)

\_\_\_\_\_ (Signature) \_\_\_\_\_ (Phone Number)

As the nominee I am aware of the contents of this nomination, I attest the information is current and correct, and, if selected, I will support the Virginia Shaggers Hall of Fame in the manner which deems me worthy of selection.

**Nominee Name:** \_\_\_\_\_ (Print) \_\_\_\_\_ (Signature)

This Nomination Form must be submitted by email to [pambarnes300@gmail.com](mailto:pambarnes300@gmail.com) no later than **September 6, 2024** by 12 midnight, or by first class mail to **Pam Barnes, Nominations Chairperson, 3962 Horseshoe Rd., N., Apt. 1B, Little River, SC 29566-6466**, postmarked no later than **Friday, August 30, 2024**. No responsibility of mail delivery shall be assumed by the Nominations Committee. No exceptions shall be made to the deadlines. If you are snail mailing, you are advised to send ASAP!

Attach your Nomination narrative to this form. Your narrative should cover five (5) major categories, as described below, shall be an attachment to this form and shall not exceed two (2) pages. You also need to attach a passport-style photo (a headshot with a neutral background and no sunglasses). The categories are:

1. Name of your nominee's home shag club membership, followed by other club memberships and number of years of membership.
2. Offices held and years held.
3. Committees/Projects chaired and/or Committee/Project participation and which years.
4. Shag dance background. Please consider shag dance ability, sharing of our dance with others, including dancing with multiple partners.
5. Any additional information you believe to be pertinent to this nomination.