



Canadian Tenpin Federation, Inc.
Fédération Canadienne des Dix-Quilles, Inc.

NOTICE OF HALL OF FAME INDUCTION CTF PROVINCIAL OR LOCAL ASSOCIATION

Inductee's Name: _____

Category of Nomination:

Athlete Builder Championship Team

Recipient Contact Information:

Name

Address

City

Province/Postal Code

Phone Number

Email

Association Honouring Nominee: _____

Date of Induction: _____

Send Certificate to:

Same as Contact Person (or)

Name

Address

City

Province/Postal Code

Phone Number

Email

Is this a posthumous induction?

Yes No

If yes, please indicate name and address of the person who will be receiving the certificate under "Recipient Contact Information" above.

Date

Signature of Association Representative

Please return this form at least 6 weeks prior to the induction ceremony to:

Canadian Tenpin Federation Inc.
email: ctf@tenpinCanada.com