



Call for Nominations

Hall of Fame Nomination Form

Please indicate on the application if the nominee is for Hall of Fame or Aviator of the Year or both and attach all documentation. Applications are due November 1.

Nominee for the Hall of Fame

Nominee for Aviator of the Year

1. _____
Full Name of the Nominee

Nominee's known living address

City State Zip

(____) _____ (____)
Nominee's Phone Number Fax Number

Date of birth Date of death (if deceased)

Nominee's place of birth (city,state)

Nominee's nearest living relative

City State Zip

(____) _____ (____)
Nominee's Phone Number Fax Number

2. _____
Name of Nominator Date

Address of the Nominator

City State Zip

(____) _____ (____)
Nominator's Phone Number Fax Number

Verifiable documentation should be provided with the application to support the accomplishments of the nominee. Mail to: SCAA Hall of Fame, PO Box 12067, Columbia, SC 29211.
Questions?? Call 1-877-359-7222 (1-877-359-7222).