

Greater Canton Amateur Billiard Association Nomination Form

This nomination form is in PDF format. You may print the form and submit it to a board member after it has been completed.

Name of Nominee

Nickname (if any)

Address of Nominee

Address Continued

City, State, Zip Code

Phone Number for Nominee

Please state your reasons, below, why you believe the above person should be nominated for induction in the Hall of Fame.

Your Name

Your Phone Number

Your email Address, if any