

Wall of Fame Questionnaire

Name: _____

Age: ____ Date of Birth: _____

Address: _____

Phone: _____

E-Mail: _____

Olean High School Graduating Class of _____

Graduating School Name and year if not OHS _____

Sports participation in high school

- 1.
- 2.
- 3.
- 4.

- # Letters: 1.
 2.
 3.
 4.

Other athletic honors while in high school

- 1.
- 2.
- 3.
- 4.
- 5.

Other high school awards, achievements, etc.

- 1.
- 2.
- 3.
- 4.
- 5.

College or University _____

Year of Graduation _____

College sports participation

- 1.
- 2.
- 3.
- 4.

- Letters: 1.
 2.
 3.
 4.

Other honors (recognition), such as: Empire Games, Scholastic Honors, Community, Military, Politics, etc.

Present Occupation (employer, etc.) _____

Family: Married ☐ Single ☐
 Spouse _____ Children _____
 Spouse - OHS Graduate? Yes ☐ No ☐

OHS Athletic Contributions: Please don't be shy!!!

Give us as much specific information about your contributions, participation in and involvement with OHS past athletics. Please include areas such as time, effort, dedication, feelings, etc. about OHS athletics.