INTERCOLLEGIATE YACHT RACING ASSOCIATION OF NORTH AMERICA ALL- AMERICA SAILING TEAM NOMINATION FORM

Name of Nominee:		
Last	First	MI
School:	Date of Birth:	
Major:	Expected Year of Graduation:	
Home Address:		
_		
Name & Address		
school copy of the		
award certificate		
should be sent, if selected.		
Name & Address		
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should be notified, if selected.		
might be helpful to		
the selection committee.		
Nomination for:	All-America (or Honorable Mention)	
(please check one	Women's All-America	,
or more)	Sportsman of the Year- (please give details in comments section ab All-America Crew	ove)
******Please complete	te the sailing record on the reverse side of this form.******	

ALL-AMERICA SAILING TEAM NOMINATION FORM, side 2

Name of Nominee:			
	SAILING RECORD		
FALL SEASON: Date Event Title	<u>Place</u>	Div. Sailed	# Schools
		-	
SPRING SEASON: Date Event Title	Place	Div. Sailed # Schools	
-			
Name of individual submitting this form: Position: School or District: Date:	Please return by May 15th to:	Adam Werblow All-America Co Boathouse St. Mary's Colle St. Mary's City,	omm. Chair ege of MD