

CALIFORNIA STATE THESPIAN
HALL OF FAME NOMINATION

For information about this honor, see Guide.

Type responses in spaces below.

NAME OF NOMINATING EdTA Member _____

Home Address _____ Troupe Number # _____

City _____ CA Zip _____ Home Phone () _____

E-mail _____ Work Phone () _____

NAME OF NOMINEE _____

HOME ADDRESS _____ Home Phone () _____

CITY _____ CA Zip _____ Work Phone () _____

State the reasons for your nomination. Please list contributions of the nominee to CA
Thespians/educational Theatre.

Mail CALIFORNIA THESPIAN HALL OF FAME NOMINATION
ON or BEFORE FEBRUARY 1
to California Thespian Hall of Fame
Gai Jones
1410 White Oak Circle
Ojai, CA 93023