LOUISIANA HORSESHOE PITCHING ASSOCIATION
of the
NATIONAL HORSESHOE PITCHING ASSOCIATION

HALL OF FAME NOMINATION FORM

Candidate's Name:_____Phone No. _____

Address: _____

No. of Years LSHPA Member: _____No. of Years NHPA Member_____

Achievements in and/or Service to the Game of Horseshoes: _____

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Nominated By: _____ Phone No. _____

Address: _____