

Nova Scotia Country Music Hall of Fame

450 LaHave Street, Unit 17, Suite 230, Bridgewater, Nova Scotia B4V 4A3 Fax (902) 527-0002



NOMINATION FORM

FOR VOCALIST NOMINATION

PLEASE READ RULES ON THIS NOMINATION FORM BEFORE PROCEEDING

Submissions must be received or post marked by February 15th in each year
Nominees must have been born in Nova Scotia

INFORMATION MUST BE PROVIDED IN ALL PLACES HAVING AN ASTERISK *

I HEREBY SUBMIT the following name and information for consideration in the NSCMHF

PLEASE PRINT INFORMATION IN BLOCK LETTERS

* Full Name: _____
(Surname) (Given name or names)

Stage Name (if applicable): _____

Name of Spouse: _____

* Complete Current Address: _____
(Street address)

_____ (Street Address line 2)

_____ (City) (Province) (Postal/zip code)

E-mail: _____ * Phone No. _____

* Birth Place: _____ (City / Town in Nova Scotia) * Birth date: _____ (Day / Month / Year)

* **Check Two**
Female
Male
Living
Deceased

1. This Nomination is for the following category (See Glossary at end of Rules for definitions)
(CHECK ONE)

Professional _____ Semi-Professional _____

2. This Nomination is for the following sub-category: (See Glossary for definitions) (CHECK ONE)

Lead Vocalist _____ Back-up Vocalist _____

THIS DECLARATION MUST BE SIGNED BY THE NOMINATOR
Please provide ALL your contact information

DECLARATION OF NOMINATOR:

I HEREBY CONFIRM that I have read the Rules for Nomination above.

I FURTHER CONFIRM that the information provided in this Nomination form is true to the best of my knowledge, information and belief. I am prepared to provide back-up proof of same if requested to do so by the NSCMHF Inductee Nominating Committee. I understand that if such proof (if requested), is not forthcoming, this nomination will be null and void.

Signature of person submitting nomination
(Nominator)

Contact Information of Nominator:

***Address:** _____

***Telephone:** _____

***E-mail:** _____

1. CONCERTS and/or SHOWS

Please list only SIGNIFICANT Concerts or Shows the Nominee was/is involved in.

(If more space required, please attach a separate sheet)

2. MUSICAL HONOR(S) AND/OR AWARD(S)

Please prioritize SIGNIFICANT musical awards or honors.

(If more space required, please attach a separate sheet)

3. RADIO AIR PLAY / TELEVISION APPEARANCE(S)

Briefly describe any TV shows or radio air play that your Nominee has had.

(If more space required, please attach a separate sheet)

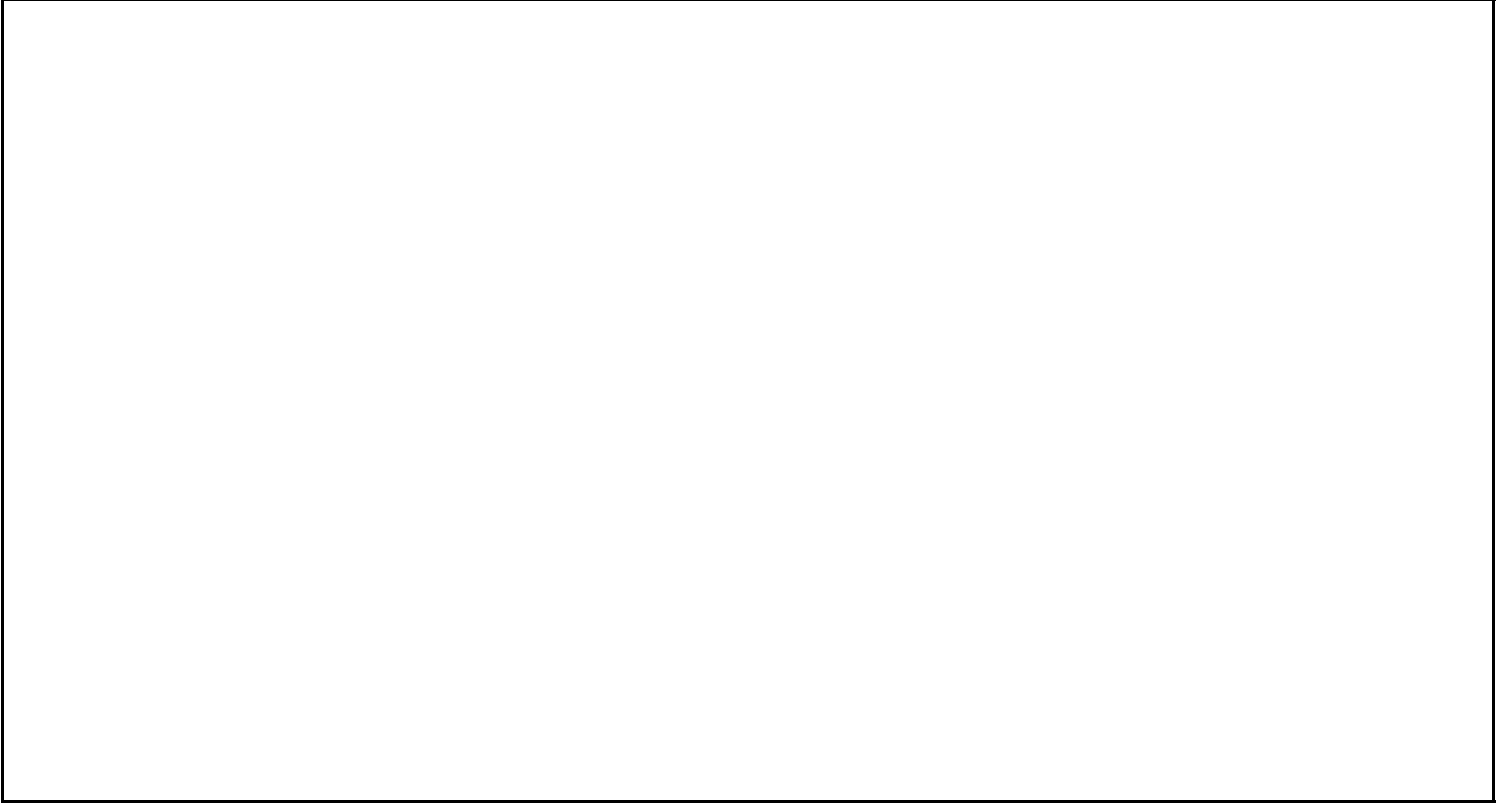
4. RECORDINGS (LPs / Singles / Tapes / Cassettes / CDs / Videos)

- (A) Please provide a brief project description of any recordings. (PLEASE NOTE: ALL nominations MUST ALSO include the location where recordings were produced - i.e. registered studio, or location other than a registered studio. If an un-registered studio, please provide name and contact number where the recording was made).**
- (B) Please submit one (1) sample of your Nominee's music**

(If more space required, please attach a separate sheet)

5. ADDITIONAL INFORMATION PERTAINING TO NOMINEE in 250 words or less.

Please note: No back-up material necessary or accepted (unless requested by the Inductee Nominating Committee).



(If more space required, please attach a separate sheet)