

Cleveland Martial Arts Hall of Fame Nomination Form

Thank you for considering an individual for the Cleveland Martial Arts Hall of Fame. Please fill out the form below and ensure that all supporting documents are included. (Resume, 3 photos, etc.) Failure to complete all accurate information may disqualify this nomination. In addition, by nominating this person, you become their sponsor. Please follow up with your nominee to assure all information is accurate.

Please print legibly:

Nominee's Information

Full Name: _____ Address: _____

City: _____ State: _____ Zip: _____ E-Mail: _____

Date of Birth: _____ Phone Number: _____

School Name (if applicable): _____

School Address: _____

Current Instructor (if applicable): _____ Nominee's Rank : _____

Date of Last Promotion: _____ Primary Style: _____

List any additional information or attach any documentation to assist in the decision making of your induction:

Nominator's Information (sponsor)

MUST BE A MEMBER OF THE CLEVELAND MARTIAL ARTS HALL OF FAME
(At least one year)

Full Name: _____ E-Mail Address: _____

Phone: _____ Relationship to Nominee: _____

Signature: _____ Date: _____

Mail or E-mail Nomination form to: CMAHOF, 6288 Gatewood Dr., Mentor, Ohio. 44060
COMAHOF@yahoo.com

2026 Induction Ceremonies will be held on April 11, 2026, Holiday Inn, Independence, Ohio
"Sponsors Welcome"