



TORCH RUNNER NOMINATION FORM

Complete and return this form by email to info@calstategames.org by June 27. Torch Runners will be selected from the information on this form.

Name: _____ Age: _____

Address: _____ Sex: Male Female

City: _____ Zip: _____

Phone: _____ Date of Birth: _____

Email address: _____

California State Games Sport: _____

Team / Club name, if any: _____

of Years participated in the California State Games: _____

Region you live: (Circle one)
San Diego Los Angeles area Central CA Northern CA

Please list Athletic Records and Accomplishments in this Event and Other Sports:
(Medal winner, Regional/National Championships, All-Scholastic, Team Captain, MVP)

What are the names of the Newspapers in your area that cover events in your town?

Summarize why you should be selected as a Torch Runner. Final selection is based on the following: participation in CA State Games, sportsmanship, attitude and effort, overall athletic participation and achievement, accomplishments outside of sports, special attributes or circumstances, and why the athlete represents the spirit of amateur athletics and the State Games movement.

Attach additional sheets, if needed.