

**Genesee Valley
Central School
"Home of the Jaguars"**



Bryan Brockway, Athletic Trainer/Director
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ATHLETE – COACH - CONTRIBUTOR

WALL OF FAME QUESTIONNAIRE

Name: _____ Date Submitted: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

High School Graduating Class Of: Year: _____ School: _____

College Graduating Class Of: Year _____ School: _____ Degree: _____

Advanced Degrees: Year: _____ School: _____ Degree: _____

Sports participation in high school: (Sport, No. of Years, etc.)

Athletic honors while in high school (All-star – All-state – Section V All-star, etc.)

Other high school awards, achievements, etc

College sports participation and special recognition

Other recognition after high school graduation.(Eg. Empire Games, Scholastic honors, Community groups, etc.)

Present occupation (employer, etc)

Family: Married _____ Single _____

Spouse _____

Children _____

GVCS Athletic Contributions

Give us as much specific information about your contributions, participation in and involvement with GVCS athletics. Please don't be shy to "toot your own horn". We appreciate all that you can tell us.