Application for Nomination to the Louisiana U.S.S.S.A. Hall of Fame



Return to: Louisiana U.S.S.S.A., 108 Innisbrook Drive, Broussard, LA 70518.6101 Deadline for submitting nominating form is December 31, 2022.

Nominee's Full Name:						
Nominee's Sport:	[] Baseball	[] Basketball	[] Bowling	[] Fast Pitch	[] Fast Ball	
[] Flag Football	[] Golf	[] Lacrosse	[] Slow Pitch	[] Soccer	[] Teolouendo	
[] Volleyball					[] Taekwondo	
Nominee's Category:	[] Player	[] Official/Umpire	[] Team Manage	er [] Exec/Director	[] Special	
Nominee's Address:						
City:			State:	_ Zip Code:		
Residence Phone Nur	nber: ()		_ Office Phone: (_)		
E-Mail Address:						
Date of Birth:			Nominee's Profess	sion:		
Marital Status:	[] Single [] Married [] Other (If other, describe):					
Spouse's Name						
Number of Children:	Names	& Ages of Children:				
		NOMINATION QUA	LIFICATIONS			
Player:	Must have played for a minimum of ten (10) years and been selected to at least five (5) regular season All-Tournament Teams and at least three (3) All Divisional, National,					
Official/Umpire:	Regional or World teams. He/she must have shown outstanding ability and character. Nominee must have officiated in at least five (5) of any combinations of Major NIT, State, Divisional, Regional, National or World Tournaments and has served as a sports official					
Team Manager:	in Louisiana for a minimum of seven (7) years. Must have managed with outstanding ability and character at least seven (7) years, with five (5) of those being higher than state level.					
Executive/Director:	Must have been an Executive and/or Director for a minimum of seven (7) years with Louisiana USSSA. He or she must have served with outstanding ability & character. Nominee must have attended five (5) National Conventions, Regional Conferences, and/or Divisional Meetings.					
Special:	This category is for those individuals that do not fall under the other categories.					
		s may be originated by anyone, but all n Hall of Fame Committee Member, Area l				
r						
Nominated by:						
Address:						
City:			State:	Zip Code:		
Endorsed by:						
i						
Nomination is NO	T complete without su	bmission of Part "B" of Hall of	Fame Nominaton Form	and Submission of a Color	Photograph.	
						

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Player Information				
Are you an ACTIVE player?	Retired?	If retired, what ye	ear?	
How many years have you play	ed your respecti	ve sport?		
How many years have you play				
List names of USSSA teams an				
What positions have you played	d?			
What is considered as your ma				
What is your approximate Louis				
or respective scoring result of the				
In your respective sport, how m		-		
In your respective sport, describ	be the type of par	ticipant you were con	sidered by the oppo	osition?
Lifetime won and lost record in	Louisiana USSS	 A? Won?	Lost?	
USSSA State, Regional, National				
Have you ever been selected as				
If yes, please list the event(s) in				
Have you every been selected to a	USSSA ALL-STATE	E Tournament team?	If y	es, please list the events and years
you were selected All-State.				
	· · · · · · · · · · · · · · · · · · ·			
Describe what you consider to be y	our greatest thrill w	hile participating in the	USSSA program?	
Describe what you consider to be y				

Official/Umpire Information

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Are you an ACTIVE official/umpire? Retired? If retired, what year?
How many years have you officiated your respective sport?
How many years have you officiated in Louisiana USSSA?
List the states in which you have been registered as a USSSA sports official/umpire?
Have you ever attended a USSSA National Officials/Umpire Clinic? If so, please give year and location
In detail, please give your participation in USSSA State, National, Regional, or World tournaments.
List below, other information, such as serving as Umpire-In-Chief, Chief Official, conducting officials clinic, etc. List on
items that pertain to the USSSA program
Team Manager/Coach Information
Are you a manager or coach, indicate which:
Are you an ACTIVE manager/coach? Retired? If retired, what year?
How many years have you been managing or coaching?
How many years have you been managing or coaching in USSSA?
Please list name(s) of team(s) managed or coached in USSSA: (indicate years)
In detail, give your participation in USSSA State, National and World Tournaments. Include tournament classification
championship title(s) won, and any other special awards received

Provide your overall USSSA won and lost record as a manager and/or coach: Won:_____ Lost:____ Tied:_____ Give in detail, your GREATEST THRILL while managing/coaching in the USSSA program:_____

Executive/Director Information

Have you ever participated in the USSSA program as a Player?	[]Yes	[] No	Show Years:
Have you ever participated in the USSSA program as a manager/coach?	[]Yes	[] No	Show Years:
Have you ever participated in the USSSA program as an official/umpire?	[]Yes	[] No	Show Years:
I have served as Louisiana USSSA Area Director from		to	
I have served as Louisiana USSSA State Director from	to		
Have you served on any Louisiana USSSA state committees? If so, please	e list the co	ommittees	and years served:
Have you served as a member of the National Board of Directors?	[]Yes	[] No	Show Years:
Have you served as a member of the National Executive Committee?	[]Yes	[] No	Show Years:
List any National Committee(s) that you have served on:			

List any major awards that you have received relating to your sport while you were serving as a USSSA Executive or Director:

In what ways do you consider that you have most successfully contributed to the Louisiana USSSA program:_____

Additional information or comments:

Special Category Information

Please indicate your area of expertise which qualified you for nomination to the Louisiana USSSA Hall of Fame

Explain in detail, what ways you have supported or contributed to the successful operation of the USSSAProgram:

Please describe the most amusing event in your career while participating in the Louisiana USSSA Program:

In a brief statement, please give your opinion as to how Louisiana USSSA has effected the sports industry:

Additional remarks and comments. Please use additional sheets if needed:

Signature Area

I hereby pledge thall all the information submitted in this form is true and factual to the best of my knowledge.

Nominated by:		Date:	
Nominee:		Date:	
Endorsed by:		Date:	
Verification. Space Be	elow to be completed	by Louisiana USSSA Hall of Fame Committee	
Proper Recommend Age Require	dress Verified: dation Verified: ement Verified: ervice Verified:	Adequate Information Submitted:	-
Nominee Approved for place	ment on Louisiana USSSA	Hall of Fame Ballot: [] Yes [] No	
BALLOT HISTORY:	(Year)	(Votes Received)	Elected

Nominee Approved for p	placement on Louisiana USSSA	Hall of Fame Ballot: [] Yes	[] No
BALLOT HISTORY: _	(Year)	(Votes Received)	Elected
	(Year)	(Votes Received)	Elected
	(Year)	(Votes Received)	Elected
	(Year)	(Votes Received)	Elected
	(Year)	(Votes Received)	Elected
Signatures:			