



**Minnesota Recreation and Park Association
United States Specialty Sports Association
Minnesota USSSA Hall of Fame Manager/Coach Application**



Election to the Minnesota USSSA Hall of Fame is the highest honor that can be bestowed upon a member. The candidate does not have to be a retiree to be nominated or elected; however, all candidates must have been a member or associated with Minnesota USSSA for at least ten (10) years and must be at least forty (40) years of age or more. The years of service and age requirement will not apply to any candidate who is deceased. The candidate will have demonstrated extraordinary service, devotion, ideas and ideals above and beyond the ordinary over the years. Therefore, very careful consideration should be given before submitting a candidate's name. Please complete all parts of this application to the best of your knowledge.

A candidate for the Hall of Fame must be recommended to the Minnesota USSSA State Director. Such recommendations must be submitted in writing no later than October 15 of the year prior to the banquet, using the Official "Minnesota USSSA Hall of Fame Nomination". All candidates nominated will be sent an application to submit by November 1 and shall include detailed background information, statistics and a recent photograph of the candidate in order for proper consideration to be given if the information wasn't already provided on the application form received. All recommendations are only good for one (1) year. Unsuccessful candidates must be resubmitted each year. A person can only be elected to the Minnesota USSSA Hall of Fame once.

On November 15 of the year prior to the banquet, the next class of Minnesota USSSA Hall of Fame inductees will be announced. They will be honored at a banquet in January and will receive their Minnesota USSSA Hall of Fame Awards. NOTE: The Hall of Fame banquet takes place every other year.

Candidate's Information

Candidate's Full Name: _____

First Name	Middle Name	Last Name
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Candidate's Address: _____
Mailing/Street Address

City	State	Zip Code
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Candidate's Phone #: _____

Home #	Work #	Cell #
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Candidate's Email Address: _____
Email Address (required)

Candidate's Date of Birth: _____

Month	Date	Year
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Nominator's Information

Nominated By: _____

First Name	Last Name
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Nominee's Address: _____
Mailing/Street Address

City	State	Zip Code
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Nominee's Phone #: _____

Home #	Work #	Cell #
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Nominee's Email Address: _____
Email Address (required)

MANAGER/COACH INFORMATION

1. Are you a manager or coach? Manager Coach Are you active or retired? Active Retired If retired, what year? _____

2. How many years have you managed or coached softball? _____

3. How many years have you managed or coached USSSA softball? _____

4. List names of USSSA teams managed or coached in USSSA:

5. Give in detail your participation in USSSA State, National and World Tournaments. Include tournament classification, championship titles won and the years. Also list any special awards received, etc.:

6. Give your overall USSSA won and loss record as a manager or coach: Wins: _____ Losses: _____ Ties: _____

7. Give in detail your greatest thrill managing or coaching in the Minnesota USSSA program: _____

8. Give the most exciting event in your career while participating in the Minnesota USSSA program:

9. In a brief statement give your opinion of the game of softball, the USSSA organization and any suggestions for its betterment:

10. Additional remarks – use extra blank sheets if needed:

