

MASSACHUSETTS USA SOFTBALL HALL OF FAME NOMINATION FORM

Name of Nominee: _____

Category: _____

Address: _____

City, State & Zip: _____

Home Phone: _____

Cell Phone: _____

E-mail Address (Required): _____

Nominated by: *(Must be a past or present Member of USA Softball of Massachusetts):*

Signature: _____ Phone Number: _____

Address: _____

REFERENCES: *Letters from all references MUST include a SIGNED letter of support.*

Name: _____ Name: _____

Name: _____ Name: _____

In order for your nominee to have a fair and full opportunity of being selected into the USA Softball of Massachusetts Hall of Fame, please complete this form in its entirety and use the check list provided below. *Please provide a written statement for the candidate that includes the following information about their career and contributions to Massachusetts USA Softball: the number of years the nominee participated in Massachusetts USA Softball, the positions and/or levels of that participation, and any awards or honors received during his/her USA Softball career. If any of the items below are incomplete, the application will be returned.*

- ✓ Completed Hall of Fame Nomination Form
- ✓ Reference letters from EACH person listed above as a Reference
- ✓ Complete résumé (Must include historical timeline of events)
- ✓ Additional Information – (testimonials, articles, support materials)

*Send complete nomination to: **USA Softball of Massachusetts, Hall of Fame Committee P.O. BOX 1558 E. Arlington, MA 02474-0023** or Email to: usasoftballma@gmail.com

Please note: Nomination form and supporting materials must be received by March 1st of the current year to be considered.