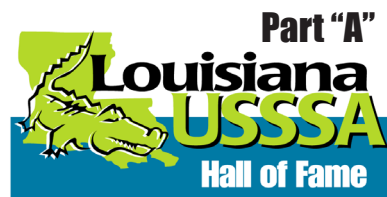


# Application for Nomination to the Louisiana U.S.S.A. Hall of Fame



Return to: Louisiana U.S.S.A., 108 Innisbrook Drive, Broussard, LA 70518.6101  
Deadline for submitting nominating form is February 1, 2025.

Nominee's Full Name: \_\_\_\_\_

Nominee's Sport:    ☐ Baseball            ☐ Basketball            ☐ Bowling            ☐ Fast Pitch            ☐ Fast Ball  
                          ☐ Flag Football            ☐ Golf            ☐ Lacrosse            ☐ Slow Pitch            ☐ Soccer            ☐ Taekwondo  
                          ☐ Volleyball

Nominee's Category:    ☐ Player            ☐ Official/Umpire    ☐ Team Manager    ☐ Exec/Director    ☐ Special

Nominee's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Phone Number: (\_\_\_\_) \_\_\_\_\_ Office Phone: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nominee's Profession: \_\_\_\_\_

Marital Status:            ☐ Single            ☐ Married            ☐ Other (If other, describe): \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Number of Children: \_\_\_\_\_ Names & Ages of Children: \_\_\_\_\_

## NOMINATION QUALIFICATIONS

**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, Regional or World teams. He/she must have shown outstanding ability and character.*

**Official/Umpire:**            *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 in Louisiana for a minimum of seven (7) years.*

**Team Manager:**            *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.*

Nominations may be originated by anyone, but all nominations must be signed and endorsed by a Louisiana USSSA Hall of Fame Committee Member, Area Director or Area Official-In-Charge in good standing.

**Nominated by:** \_\_\_\_\_

**Address:** \_\_\_\_\_

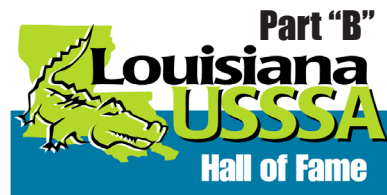
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Endorsed by:** \_\_\_\_\_

*Nomination is NOT complete without submission of Part "B" of Hall of Fame Nominaton Form and Submission of a Color Photograph.*



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Deadline for submitting nominating form is February 1, 2025.

## Player Information

Are you an ACTIVE player? \_\_\_\_\_ Retired? \_\_\_\_\_ If retired, what year? \_\_\_\_\_

How many years have you played your respective sport? \_\_\_\_\_

How many years have you played in Louisiana USSSA? \_\_\_\_\_

List names of USSSA teams and locations in which you have participated? \_\_\_\_\_

\_\_\_\_\_

What positions have you played? \_\_\_\_\_

\_\_\_\_\_

What is considered as your main position? \_\_\_\_\_

What is your approximate Louisiana USSSA lifetime batting average/shooting percentage/strike percentage/pitching e.r.a. or respective scoring result of the sport you qualified in? \_\_\_\_\_

In your respective sport, how many ultimate production items could you claim, ie Home Runs, etc? \_\_\_\_\_

In your respective sport, describe the type of participant you were considered by the opposition? \_\_\_\_\_

\_\_\_\_\_

Lifetime won and lost record in Louisiana USSSA? Won? \_\_\_\_\_ Lost? \_\_\_\_\_

USSSA State, Regional, National & World Tournament won and lost record? Won? \_\_\_\_\_ Lost? \_\_\_\_\_

Have you ever been selected as the Most Valuable Player (MVP) in a USSSA tournament or league? \_\_\_\_\_

If yes, please list the event(s) in which you were selected as the MVP? (Please include event and list year) \_\_\_\_\_

\_\_\_\_\_

Have you every been selected to a USSSA ALL-STATE Tournament team? \_\_\_\_\_ If yes, please list the events and years you were selected All-State. \_\_\_\_\_

\_\_\_\_\_

Describe what you consider to be your greatest thrill while participating in the USSSA program? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Official/Umpire Information

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 only 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 list the committees 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 USSSA Program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**A**

Nominated by: \_\_\_\_\_ Date: \_\_\_\_\_

Endorsed by: \_\_\_\_\_ Date: \_\_\_\_\_

[illegible]

Correct Category Verified:

Adequate Information Submitted: \_\_\_\_\_

Proper Signatures: \_\_\_\_\_

Photo of Nominee Attached: \_\_\_\_\_

BALLOT HISTORY:	_____ (Year)	_____ (Votes Received)	_____ Elected
	_____ (Year)	_____ (Votes Received)	_____ Elected
	_____ (Year)	_____ (Votes Received)	_____ Elected
	_____ (Year)	_____ (Votes Received)	_____ Elected
	_____ (Year)	_____ (Votes Received)	_____ Elected

Louisiana USSSA Hall of Fame Trustee