Amended 8/20/2025

**NOMINATION FORM**

**HALL OF FAME**

**LAS VEGAS SENIOR SOFTBALL ASSOCIATION**

Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee’s Phone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee’s Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Submission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mark an X for each category for which your nominee has received recognition within the Las Vegas Senior Softball Association. **Submit documentation for all marked categories.**

**The nominee must have fulfilled the requirements for the first two (2) categories. and must have fulfilled the requirements for at least four (4) of the additional categories.**

1.\_\_\_ The nominee has been a member of LVSSA in good standing for a minimum of seven (7) years. The nominee has participated in multiple tournaments at regional and national levels and has participated in LVSSA sanctioned and scheduled events such as weekly practices, games, and events.

List the year that the candidate joined the association: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_ The nominee has consistently held themselves to a high standard in being a role model for other members by demonstrating exemplary sportsmanship, citizenship, and polite behavior in all areas related to the game of softball.

List two references that will attest to this nominee’s behavior:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The nominee must have fulfilled the requirements for at least four (4) of the following additional categories.**

3. Has the nominee attended a National Tournament in one of the following roles?

 \_\_\_ Tournament Director

 \_\_\_ Manager

 \_\_\_ Coach

 \_\_\_ Player

 \_\_\_ Umpire

Provide details regarding the dates of the tournaments, what teams were involved, and what role the candidate filled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Has the nominee attended a Regional Tournament in one of the following roles?

 \_\_\_ Tournament Director

 \_\_\_ Manager

 \_\_\_ Coach

 \_\_\_ Player

 \_\_\_ Umpire

 \_\_\_ Administrator

Provide details regarding the dates of the tournaments, what teams were involved, and what role the candidate filled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Has the nominee been of service to LVSSA in one of the following ways?

 \_\_\_ member on the Board of Directors

 \_\_\_ officer on the Board of Directors

 \_\_\_ Committee Work

 \_\_\_ Field Commissioner

 \_\_\_ Equipment Manager

 \_\_\_ Communications Manager

 \_\_\_ Field Director

 \_\_\_ Assistant Field Director

 \_\_\_ Sponsor

 \_\_\_ Volunteer

 \_\_\_ Other leadership role

Provide details about which office or role was held and the dates involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Has the nominee received personal recognition or awards as a team player?

 \_\_\_ All Tournament

 \_\_\_ MVP

 \_\_\_ Batting Award

 \_\_\_ Presidential Award

 \_\_\_ Other

Provide photographs or other details regarding awards received, dates, names of tournaments, etc.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name of Member Making Nomination Telephone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address of Member Making Nomination:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Member Making Nomination

**Submit documentation for all marked categories.**

**For additional information refer to the LVSSA Website (lvssa.vegas) or contact the Hall of Fame Committee Chairperson.**