



HONOREE NOMINATION FORM

The purpose of the Brantford and Area Sports Hall of Recognition is to recognize those athletes who have achieved the highest standards of excellence and those in supporting roles whose contributions have been exemplary and significant.

THREE (3) HONOREE CATEGORIES *Only choose one (1)

INDIVIDUAL - An individual (other than an athlete) who has made a major contribution to the development and advancement of sport in our/their community.

ORGANIZATION - A recognized group, either public or private, that promotes, supports, sponsors or operates local sports activities.

TEAM - A group of individuals participating as a sports team and representing our/their community.

HONOREE ELIGIBILITY CRITERIA

INDIVIDUAL

1. Have made a significant contribution to a community sport or organization over an extended period of time.
2. Have lived in the area, which includes the City of Brantford, the County of Brant, the Six Nations and New Credit Reserves for a minimum of five (5) years prior to or during their accomplishments.

ORGANIZATION

1. Have made a significant contribution to the achievements and success of community sports overall, individual sports, individual athletes and / or sports teams over an extended period.
2. Have lived in the area, which includes the City of Brantford, the County of Brant, the Six Nations and New Credit Reserves for a minimum of five (5) years prior to or during their accomplishments.

TEAM

1. Teams must have won Provincial, National, or International championships at a minimum of junior level (21 years or older).
2. Have been based in the area, which includes the City of Brantford, the County of Brant, the Six Nations and New Credit Reserves for a minimum of five (5) years prior to or during their accomplishments.



SUBMISSION INFORMATION

1. The Deadline for submitting nominations is by **September 1st** of the year prior to the Induction Ceremony.
2. Each nomination shall contain the fullest possible data, records and merits of the candidate. The responsibility of submitting the documentation and for its accuracy rests solely with the nominator.
3. All nominations must be submitted on the forms provided by the Sports Hall. These forms are available on the Sports Hall website or at the Wayne Gretzky Sports Centre information desk.

Brantford & Area Sports Hall of Recognition

c/o Wayne Gretzky Sports Centre

254 North Park Street

Brantford, Ontario N3R 4L1

Email: sportshall@brantford.ca

Website: waynegretzkysportscentre.ca/AboutUs/SportsHallofRecognition

Thank you for your nomination.



HONOUREE NOMINATION FORM

CATEGORIES	This is a nomination in the category of							INDIVIDUAL	ORGANIZATION	TEAM	
INDIVIDUAL											
NOMINATED FOR PARTICIPATING IN THE FOLLOWING SPORT(S)											
Full Name:											
<i>Last</i>			<i>First</i>			<i>Initial</i>		<i>Nickname</i>			
Address:							<i>Apartment/Unit #</i>				
Email Address:							<i>Prov</i>		<i>Postal Code</i>		
Home Phone:	()		Work Phone:		()						
Date of Birth: (M/D/Y)			Place of Birth:			DECEASED? PLEASE CHECK APPROPRIATE BOX AND INCL. DATE OF DEATH					
				YES <input type="checkbox"/>		NO <input type="checkbox"/>		DATE OF DEATH: (M/D/Y)			
Next of kin:											
Address:							<i>Apartment/Unit #</i>				
Email Address:							<i>Prov</i>		<i>Postal Code</i>		
Home Phone:	()		Work Phone:		()						
CAREER INFORMATION											
Sports in which the Nominee was involved:											
Primary Sport:					Secondary Sport:						
Period of involvement:											
<i>Please Check what function best identifies the nominee's contribution as a builder.</i>											
Administrator <input type="checkbox"/>	Official <input type="checkbox"/>	Technician <input type="checkbox"/>	Coach <input type="checkbox"/>	Educator <input type="checkbox"/>	Organizer <input type="checkbox"/>	Sponsor <input type="checkbox"/>	Patron <input type="checkbox"/>				
TEAM/ORGANIZATION											
Team/Org. Name:											
Team/Org. Nickname:					Sport:				Years:		
Team/Org. Hometown:					Name of Team/Org. Contact:						
Address:							<i>Apartment/Unit #</i>				
Prov:	Postal Code:			Email:							
Home Phone:	()			Work Phone:		()					



INFORMATION ABOUT NOMINATING PERSON OR GROUP					
Name of the Person or Group Submitting the Nomination:					
Address:				Apartment/Unit #	
				Prov	Postal Code
Home Phone:	()	Work Phone:	()	Email	
Contact: <i>(If different from above)</i>		Home Phone:		Work Phone:	
I certify that the information provided is accurate and true to the best of my knowledge.					
SIGNATURE OF NOMINATOR:					
For Office Use Only:	Received By:		Date Received:		

**PLEASE NOTE:
USE OF THE NOMINATION FORM OR FORMAT IS MANDATORY. NOMINATIONS RECEIVED
IN A NON-STANDARD FORMAT WILL BE RETURNED FOR RESUBMISSION**



Each nomination shall contain the fullest possible data, records and merits of the candidate. The responsibility of submitting the documentation and for its accuracy rests solely with the nominator.

In point form below outline the major accomplishments of the Nominee.

If nominating a team, please also include on a separate page, a typed list of the Team members and their contact info.