International Softball Congress Hall of Fame Nomination Form



All sections must be completed IN FULL,

including complete contact information for the Nominee, and submitted by May 1st, for the Nomination to be considered.

NOMINEE	Da	ate of Nomination
Nominee's name	E-	mail
Address	Da	ate of Birth
City	State/Prov	Zip/Postal Code
Phone: Home	Business	Cell
Category, Eligibility and Con	sent	
birthday when nominated, (a) two times to the first tea (b) four times to the second	& named to ISC All World Team a minimum OR	n inactive for five (5) years OR have reached 45th um of
Field Manager – managed	I in a minimum of ten (10) ISC World Tou	rnaments
Umpire – officiated as an ι	umpire at a minimum of ten (10) ISC Wor	ld Tournaments
Administrator – a minimu	m of fifteen (15) years of service to the IS	SC (include specific roles / positions held)
Bob Welby Memorial Rec (include examples of service)	ognition of Service – contributed greatl ce)	y of and resources in support of the ISC
Years of participation/servio	ce: (i.e. 1990-2007)	
The Nominee is aware of the	nis nomination	
—	_	e host city of the annual tournament for the year in esponsible to ensure the nominee's attendance.
NOMINATOR Nomination subr	mitted by	
Address		Email
City	State/Prov	Zip/Postal Code
Phone: Home	Business	Cell

SUBMISSION Nomination deadline is **MAY 1st**. This form should be accompanied by a resume of the nominee, including stats when appropriate, and two letters of support and sent to: