

PLEASE NOTE:

Use of this nomination form is mandatory. Nominations received which are incomplete or in a non-standard format will be returned to the nominator for re-submission.

PART A: TEAM INFORMATION

Team Name:		
Sport:		
Year of Team to be honoured (a minimum of	5 years must have	e passed since the event for which the team is nominated)
Was the competition restricted by age?	Yes	No
If yes, please state the minimum and maximu	ım ages allowed to	o compete:
Vocation of Athletes' Status:		
Affiliation	University	
Amateur	Professional	
Combination	Club	
Commercial/Business	Privately Owned	I
College	Seconday Schoo	ol
Number of team members:		
Number of team members that resided in Lac	c La Biche County	during playing year(s):
Number of team players born in Lac La Biche	e County:	
Number of team members deceased:		





PART A: CONTACT INFORMATION

1. Team Representative (for Sports	s Hall of Fame purpose)
Name:	Affiliation with team:
Mailing Address:	
Town/City:	Postal Code:
Telephone: (primary)	(secondary)
E-mail Address:	
2. Team Representative (for Sport	s Hall of Fame purpose)
Name:	Affiliation with team:
Mailing Address:	
Town/City:	Postal Code:
Telephone: (primary)	(secondary)
E-mail Address:	
have reviewed the content of this r	peing submitted for the Lac La Biche County Sports Hall of Fame and Inspiration Wall. nomination and declare that the information included is true and correct. I will allow ment in with the Lac La Biche County Sports Hall of Fame and Inspiration Wall.
(Date)	(Team Representative Signature)
(Date)	(Team Representative Signature)

The personal information that you provide to Lac La Biche County is collected under the authority of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act – Section 33(c). The information will be used for the purpose of: Lac La Biche County Sports Hall of Fame. Collected personal information is protected from unauthorized access, collection, use, and disclosure in accordance with the FOIP Act and can be reviewed upon request subject to the provisions under the Act. Questions regarding the collection of personal information, please contact, Legislative Services, Lac La Biche County, Box 1679, 10307-100 Street, Lac La Biche, AB TOA 2CO, 780-623-1747.





PART A: CONTACT INFORMATION CONTINUED

Name:	
Mailing Address:	
Town/City:	Postal Code:
Telephone: (primary)	(secondary)
E-mail Address:	
(Date)	(Nominator Signature)

PART B:

1. Roster: please include names, birthdates (dd/mm/year), playing positions for all players, coaches, therapists and managers. (attach additional sheets if necessary)





2. Team Overview:

Sports Hall Of Fame & Inspiration Wall: TEAM NOMINATION FORM

PART B CONTINUED:

A) In what year was the team	formed?	
B) Was this an All Star team?	Yes	No
C) Were players not on the te championship? Yes No	am during	the qualification competition added to the team for the national/international
If yes, please explain:		

D) Describe the competition format and achievements/titles the team accumulated during their tenure. (i.e. round robin, league, playoff series, single or double elimination finals) for each step in the sequence of competitions (league, provincial, regional, national, international) leading to and during the competitions (attach additional sheets if necessary).





PART B CONTINUED:

3. Affiliation Requirements: Was the team affiliated with a provincial sport governing body?	Yes	No
If yes, which one?		
Please provide a copy of the team's registration form.		
Was the team affiliated with a national sport governing body?	Yes	No
If yes, which one?		
Please provide a copy of the team's registration form.		

4. What was the highest level of competition available at the time the team was competing:

League

Provincial

Western

National

International

PART C:

Highlight all the nominated team's results in the year in question. Please include all league, play-off and all results leading up to the championship. Please include opposing team names and hometowns, final scores, and include pertinent newspaper clippings with the nomination. Please indicate any unique features of the team and if there were any natural rivalries that existed in competition. If necessary, additional sheets can be attached.

1. Pre-National Competition Results:





PART C CONTINUED:

2. National Competition Results:

Where and when was the competition held?

Was this a sanctioned event? Yes No

If yes, by whom was it sanctioned?

3. International Competition Results:

Where and when was the competition held?

Was this a sanctioned event? Yes No

If yes, by whom was it sanctioned?

Was this a multi-sport event? Yes No

If yes, what events?





PART D:

1. Has this Fame?	team b	peen inducted into another recognized Local, Provincial, National, or International Sports Hall of
	es	No
If yes, which	ch one?	When?
Are photo	graphs,	/videos and newspaper clippings showing this event available? Yes No
If yes, plea	ase indi	cate whom Lac La Biche County should contact:
		abers of this team recognized for their performances in league, play-off and championship
Y	es	No
If yes, plea	ase iden	ntify the team members and the awards they received.
Would the		rds or photographs/videos and newspaper articles be available from these team members for possible d Center?
Y	es	No
If yes, who	om shou	uld Lac La Biche County contact?
3. Did any	team r	nember go on to compete at a higher level of sports?
Y	es	No
If yes, wha	at are th	ne details?





PART E: STORYBOARD BIO OF TEAM

In the space provided, use 500 words or less summarize the nominee's introduction for their storyboard which is displayed on the Lac La Biche County Sports Hall of Fame. Highlight key accomplishments, awards, and chain of events with dates which lead to their overall success and achievements.

*Lac La Biche County may edit text for grammar, consistency and to create personal story, but will send final for review for approval prior to production.





PART F: TEAM PHOTO

If selected for the Lac La Biche County Sports Hall of Fame, Lac La Biche County will require a photo including all of the names of team members and staff in the order that is portrayed in the photograph. Please attach a high resolution photo seperately but list the names below. Example: back row (I-r), front row (I-r), and so on. Please also include the names of team members who are missing from the photograph.

_ APPROVED /	——— DENIED
_ APPROVED /	DENIED
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