

FEMALE/MALE PLAYER INFORMATION

1. Are you an active player? Yes No Retired? Yes No If retired, what year? _____

2. How many years have you played softball? _____

3. How many and which years have you played USSSA softball? _____

4. List names of USSSA teams and locations in which you have participated:

5. What positions have you played? _____

6. What is considered as your main position? _____

7. What is your approximate USSSA lifetime batting average? _____

8. Approximately how many homeruns have you hit in USSSA league and tournament play? _____

9. What type of hitter? _____

10. Are you a pitcher? Yes No

Pitching records (if you are a pitcher): Lifetime wins and loss record in the USSSA program: Wins _____ Losses _____

USSSA World Tournament (include divisional and world series) Wins and loss record: Wins _____ Losses _____

11. Have you ever been selected as the most valuable player in a USSSA league and/or tournament? Yes No

If yes, please list below the events in which you were selected as the MVP (please list the year/years):

12. Have you ever been selected on a USSSA All-State tournament team? Yes No

If yes, please list the years in which you received this honor:

13. Have you ever been selected on a USSSA All-Tournament team in a National Tournament, World Tournament, Division Championship Tournament, or World Series? Yes No

If yes, please list the years and the name of the tournament in which you received this honor:

14. Comment in detail about your participation in USSSA State, National and World Tournaments. Include tournament classification, team championship titles and years and any special awards received that have not been mentioned above, etc.:

15. Describe what you consider to be your greatest softball thrill while competing in the Minnesota USSSA softball program:

16. Give the most exciting event in your career while participating in the Minnesota USSSA program:

17. In a brief statement give your opinion of the game of softball, the USSSA organization and any suggestions for its betterment:

18. Additional remarks – use extra blank sheets if needed:

TO BE SIGNED BY THE CANDIDATE AND THE NOMINATOR MAKING THE RECOMMENDATION

I hereby pledge that all information submitted in this application is true and factual to the best of my knowledge.

Candidate Name (print)

Candidate Name (sign)

Nominator Name (print)

Nominator Name (sign)

____ / ____ / ____
Month Date Year

The MN-USSSA Hall of Fame inductees are subject to business formal attire dress codes imposed by the Hall of Fame Committee. Typical clothing choices consist of conservative colors, fabrics and styles that is comfortable enough to feel more relaxed.

This application must be mailed to: Minnesota USSSA
Hall of Fame Committee
200 Charles Street Northeast
Fridley, MN 55432

Emailed to: softball@mnrpa.org
Faxed to: 763-571-5204 (need original copy)

Minnesota Hall of Fame Committee

Application for nomination received by Minnesota USSSA State Director on:

Final Action by Hall of Fame Committee: _____

Color Photo attached (8 x 10) – Headshot Yes No Ring Size: _____

Chair, Hall of Fame Committee Name (print)

Chair, Hall of Fame Committee Name (sign)

Month Date Year