





### All Awards

Year	Award	Description (Team, Organization, Olympic Games, World Championship)

### Major Achievements (Championships)

Year	Achievement	Description (Team, Organization, Olympic Games, World Championship)

### Photos (Please number your photos accordingly)

Photo Number	Caption	Credit
1		
2		
3		
4		

### Videos (Please number your videos accordingly)

Photo Number	Caption	Credit
1		
2		

Was the team in good standing at the time of their achievement with related local, provincial, national or international sport if applicable?  YES  NO

### REFERENCES

References may be contacted to verify some or all of the information provided in this application. Minimum of one reference required.

Name	Phone	Team/Organization	Relationship	Years Known

# NOMINATION PACKAGE REQUIREMENTS

---

Please initial on each line below to acknowledge you:

- \_\_\_\_\_ Have completed all sections of the form. (*incomplete forms may be returned to the nominator*)
- \_\_\_\_\_ Are aware that high resolution photo(s), video(s) of the nominee (preferably during competition) or memorabilia included may be used for publicity purposes if nominee is selected. Please provide a description of the photos including names of others appearing in the photo, year of the photo and who took the photo.
- \_\_\_\_\_ Have signed permission of Nominee or next of kin.

Nomination will become exclusive property of the Township of Terrace Bay to be used and displayed as part of the Terrace Bay Sports Wall of Fame. Nominations will be kept on file for three (3) years. Additional photos, testimonials, newspaper clippings, copies of awards, pictures of significant trophies or medals and any other supporting documents are encouraged to be included in the submission. We encourage copies of photos, articles, etc., over the submission of original material.

Nominations should be submitted to [sportswalloffame@terracebay.ca](mailto:sportswalloffame@terracebay.ca)

**Or**

Township of Terrace Bay  
Sports Wall of Fame Nominations Committee  
P.O. Box 40, Terrace Bay, ON P0T 2W0

## Nominator's Information

Name of Nominator:				
Street Address:			Province:	
	City:		Postal Code:	
Email:				
Phone:		Alternate Phone:		

By signing this document, the nominator is agreeing to all information included in this application is accurate and timely to the best of their knowledge and that all nomination package requirements have been included. This nomination will be considered incomplete until the photo and all other information has been received. Upon submitting the nomination, all supporting documents, including photos, become property of the Township of Terrace Bay and the Township of Terrace Bay Sports Wall of Fame.

\_\_\_\_\_  
Nominator's Signature

\_\_\_\_\_  
Date

*If you have any questions, please contact [sportswalloffame@terracebay.ca](mailto:sportswalloffame@terracebay.ca) or by phone at 807-825-3315 ext.225*