



Application for Enrolment into the NORTHERN  
ONTARIO 5-PIN BOWLERS ASSOCIATION HALL OF  
FAME

**\*\* COACHES DIVISION \*\***

DATE SUBMITTED: \_\_\_\_\_

**NAME OF NOMINEE\*:** \_\_\_\_\_

**Nominee's Information:**

**Street Address:** \_\_\_\_\_  
**City/Town:** \_\_\_\_\_  
**Postal Code:** \_\_\_\_\_  
**Telephone:** Preferred: [     ] \_\_\_\_\_

**Name of Local Association:**

\_\_\_\_\_

**\*If your Nominee is deceased, is there someone you have in mind who will accept your Nominee's Hall of Fame Enrolment Awards?  Yes  No**  
**If "yes", please provide:**

**Name:** \_\_\_\_\_  
**Street Address:** \_\_\_\_\_  
**City/Town:** \_\_\_\_\_  
**Postal Code:** \_\_\_\_\_  
**Telephone:** Preferred: [     ] \_\_\_\_\_

1. How many times has the Nominee coached in the Provincial "Open" Championships? \_\_\_\_\_ years. Also provide Province if other than Northern Ontario:

	<u># of Times</u>	<u>ASSOCIATION</u>	<u>PROVINCE</u> (If not Northern Ontario)
<b>Men's Teams:</b>	_____	_____	_____
<b>Ladies' Teams:</b>	_____	_____	_____
<b>Mixed Teams:</b>	_____	_____	_____

2. Was Nominee ever a Provincial or National coaching award Recipient?

Yes  No

If “yes”, please provide year(s), Name of Award, and Province given in if other than Northern Ontario (leave blank if it was a national award):

YEAR

Award

PROVINCE  
(If not Northern Ontario)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Please describe why your zone feels the nominee should be inducted into the hall of fame:

- 4. Please provide details of Nominee's noteworthy 5 Pin Bowling Coaching achievements (Inter-provincial, Youth Challenge, YBC etc):**

A large, empty rectangular box with a thin black border, intended for the user to provide details of the nominee's noteworthy 5 Pin Bowling Coaching achievements. The box is currently blank.

**5. Nominee's Personal Information:**

Age: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
Present Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_

**6. Is Nominee still actively coaching bowling?  Yes  No**  
If "yes" specify:

Name of event(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. If "no" how long since the Nominee retired from coaching? \_\_\_\_\_**

**8. Briefly outline why this nomination has been submitted:**

**9. If the Nominee is selected for enrolment, can you provide us with a high-resolution photograph of the Nominee suitable for display on the Northern Ontario 5 Pin Bowlers' Association Web Page?**

Yes  No \_\_\_\_\_

**Please note:** All of the information requested and provided will be held in the strictest confidence, and will be revealed for their consideration only, to the members of the Selection Committee for the Northern Ontario 5 Pin Bowlers' Association's Hall of Fame.

Please provide the following information on the person we should contact for any additional information assistance which might be required for this Nomination.

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/Town: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Telephone: Preferred: [       ] \_\_\_\_\_

**IMPORTANT:** This Nomination has been submitted on behalf of a Local Association of the Northern Ontario 5 Pin Bowlers' Association and the following Association Executive must sign it:

President: \_\_\_\_\_

**For NO5PBA Office Use Only:**

Date Received: \_\_\_\_\_

Distribution:        Master File: \_\_\_\_\_  
                          Computer File: \_\_\_\_\_  
                          Selection Committee Members: \_\_\_\_\_