



# CANADIAN SKI HALL OF FAME / LE TEMPLE DE LA RENOMMÉE DU SKI CANADIEN

## Official CANDIDATE Submission Form

**IMPORTANT:** To complete this form electronically, please enter data in shaded areas. The shaded areas will expand automatically as necessary. You may also print the form and complete it manually. This **Submission Form** and the **Submission Checklist** (page 9) are integral parts of the application.

### Nominator, Seconders and Candidate Identification: (please print)

*NOTE: This page is for office use only; confidential information will not be circulated.*

#### NOMINATOR INFORMATION

|                             |                            |                    |             |          |
|-----------------------------|----------------------------|--------------------|-------------|----------|
| NAME                        | Citizenship of Nominator   | Date of Submission |             |          |
| Street                      | City                       | Province/Territory | Postal code | P.O. Box |
| Telephone ( )      Ext. ( ) | Cellular Telephone No. ( ) | Fax ( )            | E-mail @    |          |

#### Secunder 1 NAME:

|                             |                            |                    |             |          |
|-----------------------------|----------------------------|--------------------|-------------|----------|
| Street                      | City                       | Province/Territory | Postal code | P.O. Box |
| Telephone ( )      Ext. ( ) | Cellular Telephone No. ( ) | Fax No ( )         | E-mail @    |          |
| Secunder 1 signature        |                            | Date               |             |          |

#### Secunder 2 NAME

|                             |                            |                    |             |          |
|-----------------------------|----------------------------|--------------------|-------------|----------|
| Street                      | City                       | Province/Territory | Postal code | P.O. Box |
| Telephone ( )      Ext. ( ) | Cellular Telephone No. ( ) | Fax No ( )         | E-mail @    |          |
| Secunder 2 signature        |                            | Date               |             |          |

#### CANDIDATE INFORMATION:

##### FULL NAME

|                                        |                            |                                   |             |          |
|----------------------------------------|----------------------------|-----------------------------------|-------------|----------|
| Street                                 | City                       | Province/Territory                | Postal Code | P.O. Box |
| Telephone ( )      Ext. ( )            | Cellular Telephone No. ( ) | Fax No. ( )                       | E-mail @    |          |
| Date of Birth (dd/mm/yyyy):<br>/ /     | Birthplace/ Hometown:      | Year deceased (if applicable)     |             |          |
| Name of Spouse/Partner (if applicable) |                            | Names of Children (if applicable) |             |          |

List contact information of sources that may have photos, film, video, or other A/V materials related to the candidate

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|                                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------|
| <b>CANDIDATE NAME:</b>                                                                                                                                                                    |                                                         |                                                      |                                                           |                                                        |                                                                  |
| NOMINATOR NAME:                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| SECONDER 1 NAME:                                                                                                                                                                          |                                                         |                                                      |                                                           |                                                        |                                                                  |
| SECONDER 2 NAME:                                                                                                                                                                          |                                                         |                                                      |                                                           |                                                        |                                                                  |
| <b>CATEGORY OF NOMINATION:</b>                                                                                                                                                            |                                                         |                                                      |                                                           |                                                        |                                                                  |
| NOTE: if the candidate is to be nominated in more than one category, a form for each category must be completed                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| <b>A</b><br><b>Competitor</b><br><input type="checkbox"/>                                                                                                                                 | <b>B</b><br><b>Official</b><br><input type="checkbox"/> | <b>C</b><br><b>Coach</b><br><input type="checkbox"/> | <b>D</b><br><b>Instructor</b><br><input type="checkbox"/> | <b>E</b><br><b>Builder</b><br><input type="checkbox"/> | <b>F</b><br><b>Pioneer Exemption</b><br><input type="checkbox"/> |
| Scope of the candidate's activities:                                                                                                                                                      |                                                         |                                                      |                                                           |                                                        |                                                                  |
| <input type="checkbox"/> Local <input type="checkbox"/> Provincial/Territorial <input type="checkbox"/> Regional <input type="checkbox"/> National <input type="checkbox"/> International |                                                         |                                                      |                                                           |                                                        |                                                                  |
| Summarize the candidate's most significant national contribution to skiing and/or snowboarding: (300 words or less)                                                                       |                                                         |                                                      |                                                           |                                                        |                                                                  |
|                                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| Recognition and Awards: (List all sources of recognition with dates)                                                                                                                      |                                                         |                                                      |                                                           |                                                        |                                                                  |
|                                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| Club Affiliations: (List all ski and/or snowboard related clubs the candidate is affiliated with and years of affiliation)                                                                |                                                         |                                                      |                                                           |                                                        |                                                                  |
|                                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| Business Affiliations                                                                                                                                                                     |                                                         |                                                      |                                                           |                                                        |                                                                  |
|                                                                                                                                                                                           |                                                         |                                                      |                                                           |                                                        |                                                                  |
| <b>Proceed to section of submission form specific to the candidate:</b> (A:Competitor, B:Official, C:Coach, D:Instructor, E:Builder, F:Pioneer Exemption)                                 |                                                         |                                                      |                                                           |                                                        |                                                                  |

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CANDIDATE'S NAME:

**C. COACH**

In order for a submission to be considered, the candidate **must** have:

- made a national, as opposed to a local or regional, contribution to skiing and/or snowboarding,
- made a sustained contribution
- made a unique contribution
- made a contribution beyond the primary reasons for the submission.

To what team(s) and/or individual competitor(s) was the candidate accredited? For what for what period of time including dates?

What objectively measurable performance results were achieved by the team(s) and/or individual competitors ?

What did the candidate contribute to foster the team(s) and/or individual competitor(s) morale and team spirit?

What discernable effects did the candidates coaching ability have nationally ?

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**Submission Checklist**

- Candidate Submission Form is complete
- Declaration is signed by the Nominator (below)
- Page one of form is signed by two Seconders
- I understand that any additional information included with this submission, i.e. newspaper clippings, photos, articles, etc. may be retained in the files of the Canadian Ski Museum but will not be circulated to the steering nor elections committee.

**E. Declaration**

**I affirm that**, to the best of my knowledge, the information in this submission is accurate, complete, and that the candidate is fairly presented.

**Nominators Signature**

|                  |                            |             |
|------------------|----------------------------|-------------|
|                  |                            |             |
| <b>Signature</b> | <b>Name (please print)</b> | <b>Date</b> |

|                 |                 |               |
|-----------------|-----------------|---------------|
| OFFICE USE ONLY | DATE RECEIVED → | RECEIVED BY → |
|-----------------|-----------------|---------------|