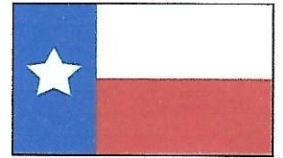




**TEXAS  
SENIOR SOFTBALL  
HALL OF FAME  
APPLICATION**



Submit to: TSSHOF Chapter Director/Committee Members

(Please Type)

**Category: Circle appropriate category: PLAYER, MANAGER, TOURNAMENT DIRECTOR, UMPIRE, SPONSOR, SPECIAL ACHIEVEMENT**

**Candidate Name:** \_\_\_\_\_  
Last Name First Name Initial

**Address:** \_\_\_\_\_  
\_\_\_\_\_ City State Zip Code

**Telephone:** \_\_\_\_\_ **Residence:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **Business:** \_\_\_\_\_

**Cell:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

**Current Occupation:** \_\_\_\_\_

**How did you first learn about Senior Softball?** \_\_\_\_\_

**Positions Played:** \_\_\_\_\_

**Number of Years Participating in Texas Senior Softball:** \_\_\_\_\_

**Current Team:** \_\_\_\_\_

**Previous Senior Softball Teams:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please List Senior Softball positions held:**

**Example: Manager, Coach, Sponsor, Officer of Senior Softball Association,**

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Year	Association	Age Division	Team Name
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**Awards/Honors/Distinguished Accomplishments received (Current and Prior to Senior Softball).**

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(attach a separate sheet if necessary)

