



Community Sports Institute

Bayou Region Athletic Hall of Fame

NOMINATION FORM

The Bayou Region Athletic Hall of Fame is established to recognize athletes, athletic coaches and athletic staff members who have roots in Terrebonne, Lafourche or Assumption Parishes and have made outstanding performances and achievements in their particular field of athletics.

Conditions for nomination to be inducted:

A candidate may be nominated by a family member, friend or the candidate himself/herself, but must meet the submission deadline established by the Selection Committee.

The candidate must be originally from the tri-parish area or have participated in athletic programs for schools located in the area.

A candidate is not eligible for a period of five years following the completion of his/her athletic playing career. This period shall not be applicable to coaches or athletic staff members

The award may be voted posthumously.

➤ *A candidate must have made a contribution to athletics:*

- On the High School level (and/or)...
- On the Collegiate level (and/or)...
- On the Professional level

➤ *Consideration should be given:*

- To the candidate's complete body of work
- To whether the candidate has lead a respectful and responsible life during and after his/her athletic endeavors

Five selected individuals will be presented annually at a gala to be held at a designated reception facility in Terrebonne Parish and hosted by The Foundation for Terrebonne General

The photo of each inducted member shall be framed and permanently displayed on the Terrebonne General Community Sports Institute lobby wall.

Selection Committee:

A Selection Committee, composed of no less than seven and no more than fifteen members, shall be chosen annually by decision of a representatives of The Foundation for Terrebonne General, the Terrebonne General Health System Board of Directors and the Community Sports Institute. This committee shall vote for the Hall of Fame Class on a yearly basis. There shall be no term limits for committee members and members shall be willing to serve for no compensation. The names of the Selection Committee members shall be kept confidential.



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Nominee Information:

Name: _____ (Maiden Name if applicable): _____

High School: _____ Class of: _____

College (if applicable): _____ Class of: _____

Hometown (area raised): _____

Present Address (if living): _____ City: _____ State: _____ Zip: _____

Present Phone (Home): _____ (Cell): _____

Email: _____

List Known Athletic/Coaching Accomplishments:

- High School Level: _____

- Collegiate Level: _____

- Professional Level (if applicable): _____

➤ Additional comments related to community, civic, public, municipal, etc. contributions: _____

*** If available, please add any attachment(s) of additional information deemed pertinent as to why this nominee should be considered as an inductee into the Bayou Region Athletic Hall of Fame.**

Nominated by: _____

E-Mail Address: _____

Address: _____ **Cell:** _____

Reason for Nomination: _____

Please send to elmy.savoie@tghealthsystem.com fax: 985-873-3502
or mail to Elmy Savoie at 8166 East Main Street – Houma, LA - 70360