



PART A

NOMINATOR INFORMATION

DYNASTY TEAM CATEGORY NOMINATION FORM

NOMINATION GUIDELINES FOR DYNASTY TEAMS

1. Only results from the year in question will be considered.
 - a. The Selection Committee may consider whether it is justifiable to select more than one team in any given year.
 - b. The Selection Committee may consider amalgamating two or more teams that repeat as National Champions
2. A minimum of three (3) years have passed since the events for which this team is nominated.
3. The “Junior” level of competition will be the minimum level of accomplishment considered for a team.
4. In order to be eligible for induction a team must be composed of a core group of players over consecutive seasons.
5. Definition of a Dynasty Team: An organization supporting a team that competed together (as a team) successfully over consecutive seasons.

*Teams declared National Champions by default or win by “walk through” are not eligible for nomination.

Please Note: Use of the Nomination Form is mandatory. Nominations received in any non-standard format will be returned for re-submission. Nomination deadline is **February 1, 2021.**



TITLE: TEAM O LEGACY O SPECIAL O Other (Please Specify): _____

TEAM NAME: _____

YEAR OF TEAM TO BE HONOURED: _____

A minimum of three (3) years must have passed since the events for which the team is nominated)

Were any competitions restricted by age? Y__ N__

If yes, was there a minimum age? Y__ N__

If Yes, please specify: _____

If yes, was there a maximum age? Y__ N__

If Yes, please specify _____

If Yes, what was the name of the age category? _____

Competition Category	
Amateur _____	Commercial/Business _____
Professional _____	Business _____
Combination _____	Privately owned _____
Affiliation _____	College _____
Club _____	University _____



PART B

CONTACT PERSON FOR TEAM

NAME: _____

ADDRESS: CITY/TOWN: _____ PROVINCE: _____

POSTAL CODE: _____

CONTACT: PHONE (H): _____ PHONE (C): _____

EMAIL: _____

NOMINATOR'S SIGNATURE: _____

DATE: ____/____/____



PART C

NOMINATOR INFORMATION

NAME: _____

ADDRESS: CITY/TOWN: _____ PROVINCE: _____

POSTAL CODE: _____

CONTACT: PHONE (H): _____ PHONE (C): _____

EMAIL: _____

NOMINATOR'S SIGNATURE: _____

DATE: ____/____/____



PART D ROSTER INFORMATION

1. **ROSTER:** Please include names for all players, coaches, trainer/therapists, and Managers. (Attach additional sheets if necessary)

2. TEAM INFORMATION

- a. In what year was the team formed
- b. Was this an All Star team? Y___ N___ (If yes, this team is NOT eligible)
- c. Were players not on the team during the qualification added to the team for any National/International championship? Y ___ N ___

If yes, please explain;

- d. Describe the format (round robin; league; best-of-seven playoff series; single or double elimination finals) for each step in the sequence of competitions (league: provincial); regional; national; international) leading to and during competitions.

3. HIGHEST LEVEL OF COMPETITION AVAILABLE AT THE TIME THE TEAM WAS COMPETING:

PROVINCIAL _____

NATIONAL _____

INTERNATIONAL _____



PART E: MEMORABILIA AND MEDIA

A component of the Induction Process is the preparation of an Exhibit and a Video Presentation to commemorate the nominee. Please indicate below what items are available to support these programs. Please **do not** submit these items with the Nomination Form.

1. Medals/Plaques/Trophies/Equipment/Other Memorabilia

Available for Loan

These items are available for permanent collection

Not available

2. Photographs/Video/Newspaper Clippings/etc.

Available for Loan

These items are available for permanent collection

Not available

Nominations shall reflect upon the character and conduct of the person or persons nominated. This information should be supported by letters of reference from exemplary individuals from the organization and/or community.

Before sending this form to the Manitoba Hockey Hall of Fame please ensure that all applicable parts have been completed and that a black and white, head and shoulders photograph (4 x 5 inches) of the nominee is included with the nomination. **Please note that scanned photographs are NOT acceptable.**

The photograph should have the photographer's name written or stamped on the back of the photograph. The nominator **must** provide a letter from the photographer which stated that the Saskatchewan Hockey Hall of Fame has his/her permission to use the photograph for publicity purposes, as well as within the Hall for exhibit purposes. The Manitoba Hockey Hall of Fame will credit the photograph to the photographer in all uses.



PART F: FINAL CHECKLIST

Nominations **MUST** be received at the Manitoba Hockey Hall of Fame by 5:00 pm on **February 1, 2021**. Faxed or e-mailed copies on nominations are accepted with the understanding that a hard copy of the nomination and all required attachments is also on its way via a postal or courier service.

Please ensure that you have included the following items in your package:

- Nomination Form completed in its entirety and signed by the nominator
- Nominee's signature acknowledging the accuracy of the information and authorizing submission of the Nomination Form
- A 4 x 5 inch Black and White photograph of the nominee. Head and Shoulder photograph only. No scanned photographs
- Photographer release form. Sample Copy attached.
- Letters of support

PART G: SUBMISSION INFORMATION

Submit to: Manitoba Hockey Hall of Fame Nominations Committee
#200-1215 Henderson Hwy
Winnipeg, MB
R2G 1L8
Telephone: 204-661-6777

Please be aware that nominations are rarely successful in their first year of submission. Nominations are retained from year to year subject to the discretion of the Induction Selection Committee and Nomination Guidelines established by the Manitoba Hockey Hall of Fame. Nominators are encouraged to submit updates to the nomination on an annual basis as applicable to the nominee.