



Tantramar and The Sackville Sports Wall of Fame Board of Directors

Present...

**The 21st Annual Sports Recognition Night
January 29th, 2026- 6:00pm
Tantramar Regional High School Auditorium**

This event is designed to recognize individuals and teams who, through their athletic endeavors or other participation, have brought recognition to the hometown of Tantramar.

Recognition certificates will be presented to individuals or teams who had the following status in the **2025** calendar year:

1. Participated on National teams or at National individual sport championships;
2. Participated on Provincial teams or as individuals representing New Brunswick at events like the Canada Games or national championships;
3. Medaled at Provincial Championships as individuals or teams;
4. Were named to Provincial all-star teams in their particular sport;
5. Were named as most valuable players or to all-star teams at the Provincial Championships events in their particular sport;
6. Were recognized as coaches, referees, officials, administrators or volunteers by a sporting body at the provincial level or higher;
7. Other... pursued your sport or supported a sport with recognition at the equivalent of Provincial championships or higher. Please explain.

Please submit your **TYPE-WRITTEN** nomination form to j.wilson@TantramarNB.com. If you have any questions, please contact email address above or call 506-364-4958.

*****ALL NOMINATION FORMS MUST BE RECEIVED BY 4:30PM ON
MONDAY, JANUARY 5, 2026*****

Annual Sports Recognition Reception Registration Form

Individuals

Name: _____

Address: _____

Telephone: _____

E-mail: _____

Sport(s): _____

**Title Won or Special
Status (All-star, etc.):** _____

Please indicate those categories (from 7 listed on cover page) that apply and provide in 100 words or less an explanation of the achievement in 2025 that can be shared with those in attendance at the presentation of certificates. Please type or print clearly.

Submitted By: _____ **Phone #:** _____

Email: _____

Annual Sports Recognition Reception Registration Form

Teams

Team Name: _____

Sport: _____

Coach's Name: _____

Coach's Phone _____

Coach's E-mail: _____

**Provincial/National
Placement or Title:** _____

Category (if applicable): _____

NOTE: Please provide a team roster of players' names and those of coaches, managers and other team staff.

Please indicate those categories (from 7 listed on cover page) that apply and provide in 100 words or less an explanation of the team's achievement in 2025 that can be shared with those in attendance at the presentation of certificates. Please type or print clearly.

ROSTER	SUMMARY OF ACHIEVEMENTS

Submitted By: _____ Phone #: _____

Email: _____