



This form must be used for all award requests. It is available at minnesotahockey.org.

Awards Request Form

MN Hockey District: _____

Association Name: _____

Team Name: _____

Team Classification: _____

Zero Award: For a goalkeeper **playing a complete game** without allowing a goal.

Hat Trick Award: For a player scoring three goals in a game.

Playmaker Award: For a player registering three assists in a game.

Player awards are distributed under the following conditions:

1. The recipient is a registered player.
2. The game was in league competition (not scrimmage or exhibition), a sanctioned tournament or a MAHA playoff involving only USA Hockey registered teams.
3. The game was officiated by registered USA Hockey referees.
4. Eligible player categories: All players Squirt and above.
5. **A readable copy of the score sheet with the players listed is required with the application.**
6. **No patches will be awarded for games in which the goal difference is 10 or greater (i.e. 10 to 0, 12 to 2, etc.).**
7. **Limit of ONE of each award per player per season - i.e. one Hat Trick, one Playmaker and one Zero**

	Players Name	Opponent	Game Date	Game Score	Zero Award	Hat Trick	Play-maker
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

Please allow 10 to 14 days for processing.

Send Request to:

Sue Sentieri
1540 Oakwood Terrace
Shoreview MN 55126
612-619-0846

We do not mail patches to individual players.

Coach/Manager - this is where the awards will be mailed

Name: _____

Street: _____

City, State, Zip: _____