

Fill out this information before the game starts. After the game...White sheet goes to the Home team and Yellow sheet goes to Visiting Team

Keep track of where shots were taken and scored.

(WHITE) HOME TEAM: SCC (YELLOW) VISITOR: Level: U10B Girls (PINK) OFFICIALS: DATE: 3/31/2016 (GOLDENROD) DISTRICT DIRECTOR

SHOTS ON GOAL SAVED AND SCORED

Home Team Sticker Roster

Visiting Team Sticker Roster

PERIOD 1, 2, 3

NUMERICAL HOCKEY SHEET

Legend: ⊙ = Scored, X = Shot Taken

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X = Shot Taken

Abbrv. what team is in goal as you are seeing it on the ice.

SCORING						PENALTIES					Home F. Play Min.	Away F. Play Min.		
Per.	Time	Team	Goal	Assist(s)	PP/SH	Per.	Team	No.	Offense	Min.	Time In	Time Out		
1	0:14	NU	48		PP	1	LS	24	hooking	1:30	9:28	8:14		
1	4:04	LS	33			1	NU	50	holding	1:30	4:16	4:04		
2	0:28	NU	41			3	NU	54	tripping	1:30	11:52	10:22		
2	2:23	NU	48											
3	6:16	LS	33	37										
3	6:04	LS	33											

Fill in ALL the columns for scoring. PP = on power play. SH = short handed

Fill in ALL the columns for penalties. No need to fill in Home and Away F. Play columns

Saves: count the shots taken. Do for each period

Fill in goals scored per period.

Acceptable Coach/Fan Behavior? (no ejections)		Fair Play Point Earned?				Total Fair Play Minutes	
Home (Yes) (No)	Away (Yes) (No)	Home (Yes) (No)	Away (Yes) (No)	Home (Yes) (No)	Away (Yes) (No)	Max. FP Minutes for this level	
Saves	1st Per.	2nd Per.	3rd Per.	O.T.	Total		
Home	9	2	8		19		
Visitor	1	3	3		7		
Scoring	1st Per.	2nd Per.	3rd Per.	O.T.	Total		
Home	1	0	2		3		
Visitor	1	2	0		3		

Sign your name as the scorer

HOME TEAM HEAD COACH (print) [Signature] (sign) [Signature]

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

ASS'T COACH (print) \_\_\_\_\_ (sign) \_\_\_\_\_

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

ASS'T COACH (print) \_\_\_\_\_ (sign) \_\_\_\_\_

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

MANAGER (print) \_\_\_\_\_ PHONE ( \_\_\_\_\_ ) \_\_\_\_\_

VISITING TEAM HEAD COACH (print) [Signature] (sign) [Signature]

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

ASS'T COACH (print) \_\_\_\_\_ (sign) \_\_\_\_\_

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

ASS'T COACH (print) \_\_\_\_\_ (sign) \_\_\_\_\_

CEP # \_\_\_\_\_ CEP LEVEL \_\_\_\_\_ YEAR ATTAINED \_\_\_\_\_

Home and Visiting Coach MUST sign the sheet before the start of the game. The on ice official will bring this over to the coaches.