



HNA25

OFFICIAL SCORESHEET

Send Completed Sheet To:
Hockey North America/DSSI
P.O. Box 78
Sterling, VA USA 20167
Tel: (703) 430-8100
Fax: (888) HNA-SKOR

Level of Play/Game Type
 Intermediate
 Beginner
 Tournament
 Reg Season
 Playoff Gm

AFTER THE GAME: Call in the final score the evening of the game, or the next morning. Be sure to note City, Teams, and Final Score. Fax the completed scoresheet to HNA's toll free fax line (888) HNA-SKOR. This sheet must be returned to the league office to receive credit to your player account.
Scorekeeper: Mark your name clearly to ensure proper credit.

Team Name		1	2	3	OT	Final
AWAY						
HOME						

Date: _____
 Arena: _____
 Time: _____ AM / PM
 Game Supervisor: _____

HOME TEAM				AWAY TEAM			
#	Name	#	Name	#	Name	#	Name
_____ (G)	_____	_____ (G)	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

HOME TEAM SHOTS ON GOAL												AWAY TEAM																																															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60

Shot Totals	Per. 1:	Per. 2:	Per. 3:	Total:	Shot Totals	Per. 1:	Per. 2:	Per. 3:	Total:
-------------	---------	---------	---------	--------	-------------	---------	---------	---------	--------

HOME TEAM SCORING						AWAY TEAM SCORING						PLAYER NO.			PENALTIES					
PER	PP/SH	TIME	GOAL	ASSIST	ASSIST	PER	PP/SH	TIME	GOAL	ASSIST	ASSIST	PERIOD	HOME	AWAY	MIN.	OFFENSE	START	EXPIRED	G/G	

Comments: _____

Officials
 1. _____ Print: _____ 2. _____ Print: _____ 3. _____ Print: _____
 Top Copy: League Office 2nd Copy: Local Administration 3rd Copy: Home Captain 4th Copy: Away Captain 5th Copy: Game Supervisor

Revised 07/2004