



**Enter USA Hockey Registered Association Name:**

# USA HOCKEY OFFICIAL SCORESHEET

**Circle the Home or Visitor for each team:**



HOME \_\_\_\_\_ VISITOR \_\_\_\_\_  
TEAM NAME

Circle the Level of Play of the Home team:

HOME \_\_\_\_\_ VISITOR \_\_\_\_\_  
TEAM NAME

TIER I  TIER II  GIRLS/WOMEN  HIGH SCHOOL  HOUSE/REC.  ADULT

**DIVISION must be current USA Hockey Level (ie: 10U, 12U):**

### PLAYERS

POS.	NO.	PLAYERS

**Enter the Jersey Number and player name as it is listed on the team USA HOCKEY roster for each player that is designated to play this game. Roster stickers may be used, but if a player is not present, thier name must be crossed out on ALL copies of the scoresheet. Position is only required for the goalies.**

### SCORING

NO.	PER.	CLOCK TIME	G	ASSIST	TYPE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

**Enter Individ. scoring information. G and Assist are asking for the jersey number of player who scored and assisted. Type of goal is ES, SH, PP, PS, etc..**

DATE: \_\_\_/\_\_\_/\_\_\_ GAME NO. \_\_\_\_\_ DIVISION: \_\_\_\_\_

TIMES: Start \_\_\_\_\_ End \_\_\_\_\_ Curfew \_\_\_\_\_

ARENA: \_\_\_\_\_ SURFACE: \_\_\_\_\_

### PRINTED NAMES

Official Scorer	Referee Signature
Official (R or L)	Level
Official (R or L)	Level
Official (R or L)	Level

OFFICIALS' NOTE: All on-ice officials must make a brief written statement of all Game Misconduct and Major Penalties on the back side of the top copy of this scoresheet.

**Record the team scoring by period below:**

### SCORING BY PERIODS

	1	2	3	OT	TOTAL
HOME					
VISITOR					

### SCORING

NO.	PER.	CLOCK TIME	G	ASSIST	TYPE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

**CRITICAL: Referee must sign scoresheet**

### GENERAL INSTRUCTIONS:

**Enter requested information each box.**

**Clarifications or specific instructions have been provided where necessary.**

### PENALTIES

PER.	NO.	OFFENSE	MIN.	OFF	START	ON

**Enter the requested info for each coach as it appears on the USA Hockey Roster for each team.**

### PENALTIES

PER.	NO.	OFFENSE	MIN.	OFF	START	ON

**Record the information requested for each penalty as it occurs:  
Period  
Jersey Number  
Offense (ie, slashing, tripping)  
Duration of penalty  
Time player enters box (ie. 4:10)  
Start (typically same as above)  
Time player leaves the box**

### TEAM OFFICIALS

HEAD COACH:		
HEAD COACH: (sign)		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		

### GOALKEEPING

JERSEY NO.	SHOTS				SAVES				MIN. PLAYED		
	1	2	3	OT	TOTAL	1	2	3		OT	TOTAL
TOTALS											

### TEAM OFFICIALS

HEAD COACH:		
HEAD COACH: (sign)		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		
CEP LEVEL:	CEP NO.:	YEAR:
COACH:		

### GOALKEEPING

JERSEY NO.	SHOTS				SAVES				MIN. PLAYED		
	1	2	3	OT	TOTAL	1	2	3		OT	TOTAL
TOTALS											

**Goalie statistics can be recorded, but are not required.**