



USA ROLLER SPORTS RESULT SUMMARY FORM

Completely fill in all applicable fields. Forms can be mailed, faxed, or emailed to the USARS Office.

All forms are due within 7 days of the completion of the event. For double headers or tournaments, a separate form is required for each game.

Email to: bbenson@usarollersports.org. or Fax to: 1-(402) 483-1465 or Mail to: USARS 4730 South Street, Lincoln, NE 68506,

EVENT DETAILS

Sanction Number: _____

Start Time: _____

Date: _____

End Time: _____

Venue: _____

Number of Periods: _____

ROSTER INFORMATION

Indicate the team captain with a 'C' and the alternate with an 'A'.

HOME TEAM

Club: _____

Team: _____

Club Id: _____

VISITING TEAM

Club: _____

Team: _____

Club Id: _____

	Uniform #	Player Name (legal & skate)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
ALT		
ALT		
ALT		
ALT		
ALT		
Coach		
Coach		

	Uniform #	Player Name (legal & skate)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
ALT		
ALT		
ALT		
ALT		
ALT		
Coach		
Coach		

This sheet allows for 20 players (15 plus up to 5 alternates) to be listed. Cross or black out players not participating in game.

SCORE SUMMARY		
	HOME	VISITING
	Points	Points
Period 1		
Period 2		
Period 3		
Period 4		
TOTAL		

PENALTY SUMMARY				
	HOME		VISITING	
	Minors	Majors	Minors	Majors
Period 1				
Period 2				
Period 3				
Period 4				
TOTAL				

[illegible][illegible]

REQUIRED SIGNATURES			
Obtain immediately upon the conclusion of the event!			
	Legal Name	Skate Name	Signature
Head Referee			
Scorekeeper			
Home Team Captain			
Visiting Team Captain			