



2018-19 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 5 days of the completion of the event. For double headers or tournaments, a separate form is required for each game.

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

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		

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				

REFEREE INFORMATION

Legal Name (skate name optional)	Club Affiliation	Position

SUPPORT STAFF/NON-SKATING OFFICIAL INFORMATION

Legal Name (skate name optional)	Club Affiliation	Position

REQUIRED SIGNATURES

Obtain immediately upon the conclusion of the event!

	Legal Name	Skate Name	Signature
Head Referee			
Scorekeeper			
Home Team Captain			
Visiting Team Captain			