



**MICHIGAN AMATEUR HOCKEY ASSOCIATION
OFFICIAL GAME REPORT
INJURY OR ATTEMPTING TO INJURE GAME OFFICIAL
TO BE USED ONLY FOR MATCH PENALTIES ASSESSED
UNDER RULE 601(g1) OR 601(j1)**



1. PENALIZED PLAYER / COACH / MANAGER INFORMATION:

NAME: _____

PLAYER NUMBER: COACH MANAGER HOME VISITOR

BOYS/MEN'S CLASSIFICATION:

ADULT HIGH SCHOOL MIDGET BANTAM PEE WEE SQUIRT MITE

GIRLS/WOMEN'S CLASSIFICATION:

WOMEN 19&under 16&under 14&under 12&under 10&under 8&under

DIVISION:

AAA AA A BB B C Other _____

2. PENALTY INFORMATION:

MATCH PENALTY

601(g1) *IF ANY PLAYER IS GUILTY OF INFLICTING PHYSICAL HARM TO A GAME OFFICIAL IN ANY MANNER OR ATTEMPTING TO DO SO, HE/SHE SHALL BE ASSESSED A MATCH PENALTY.*

601(j1) *IF ANY COACH IS GUILTY OF INFLICTING PHYSICAL HARM TO A GAME OFFICIAL IN ANY MANNER OR ATTEMPTING TO DO SO, HE/SHE SHALL BE ASSESSED A MATCH PENALTY.*

PERIOD: _____ TIME OF PENALTY: _____

NAME OF ASSULTED OFFICIAL: _____

DID **ACTUAL INJURY** OCCUR DUE TO THIS PENALTY? YES NO

3. GAME INFORMATION:

DATE OF GAME: _____ TIME OF GAME: _____

ARENA: _____

HOME TEAM: _____

VISITING TEAM: _____

4. OFFICIALS INFORMATION:

REPORTING OFFICIAL: _____ REFEREE LINESMAN

OFFICIAL: _____ REFEREE LINESMAN

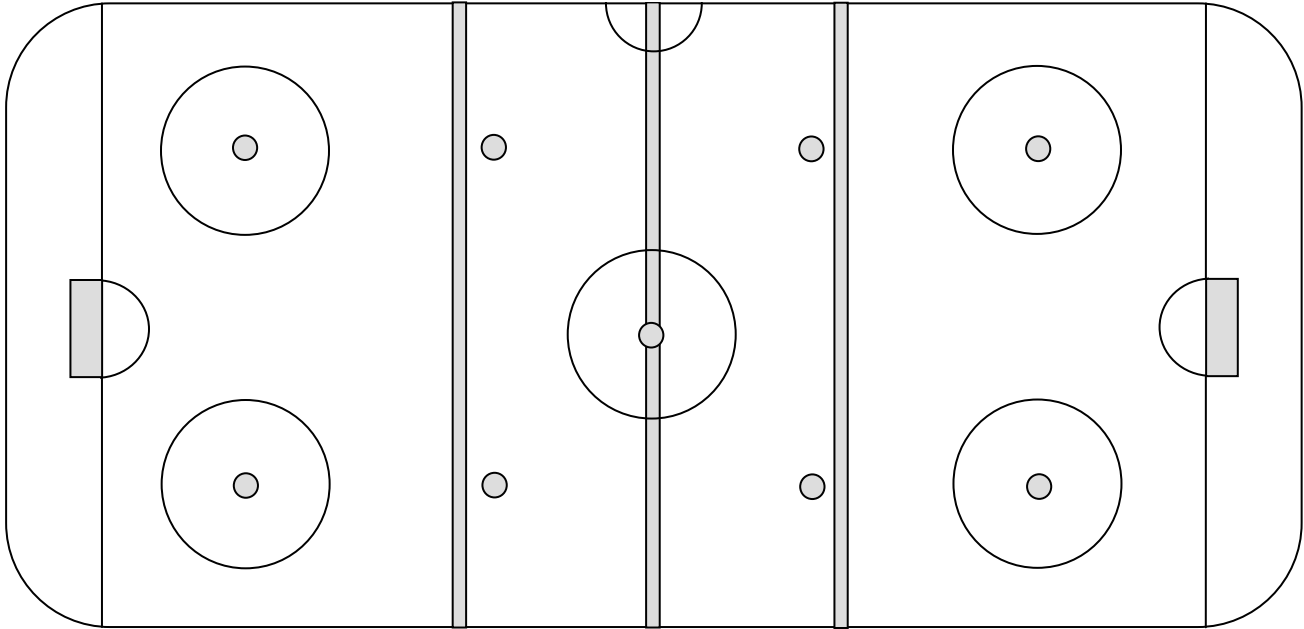
OFFICIAL: _____ REFEREE LINESMAN

5. REPORT DETAILS:

- DESCRIBE ***IN DETAIL*** ALL INFORMATION PERTINENT TO THE PENALTY
- USE EXTRA COPIES OF THIS PAGE IF NECESSARY

6. ICE SURFACE DIAGRAM:

- USE THE ICE SURFACE DIAGRAM IF IT WILL HELP YOUR REPORT IN ANY WAY.
- USE THE FOLLOWING SYMBOLS TO HELP OTHERS UNDERSTAND YOUR DIAGRAM.
 - H = HOME TEAM PLAYERS; HC = HOME TEAM COACH; HM = HOME TEAM MANAGER
 - V = VISITING TEAM PLAYERS; VC = VISITING TEAM COACH; VM = VISITING TEAM MANAGER
 - INCLUDE PLAYER NUMBERS IF IT WILL HELP (example: H19)
 - X = PENALIZED PLAYER / COACH/ MANAGER
 - R = REFEREE; L = LINESMAN; CIRCLE REPORTING OFFICIAL



7. MATCH PENALTY 601(g1) OR 601(j1) CHECKLIST:

- RETAIN **ORIGINAL** SCORE SHEET AT THE END OF THE GAME
- CONTACT MICHIGAN REFEREE-IN-CHIEF **WITHIN 24 HOURS**
- DATE OF CALL: _____ TIME OF CALL: _____
- SEND **ORIGINAL SCORE SHEET** AND THIS REPORT TO DISTRICT SUPERVISOR WITHIN **48 HOURS**

NAME OF SUPERVISOR: _____

DATE SENT: _____

- RETAIN COPY OF SCORE SHEET AND THIS REPORT FOR YOUR OWN RECORDS

8. SIGNATURE OF REPORTING OFFICIAL:

ALL INFORMATION IN THIS REPORT IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____

DATE: _____