BTHL GAME MISCONDUCT/INCIDENT REPORT

DATE: ____ ____ ____ GAME #: ____ DIVISION/CLASS: _____
MM DD YY

HOME TEAM: _____ VISITING TEAM _____

ARENA NAME: _____

SCORE: HOME TEAM ___ VISITING TEAM ___ PLAYER GAME MISCONDUCT # 1 2 3
(CIRCLE #)

REFEREE NAME(S): _____

TEAM PLAYED ON: _____ PLAYER NAME & #: _____

PERIOD OF OCCURRENCE: ____ TIME ON CLOCK: _____

WRITE-UP OF INFRACTION ON SCHORESHEET: _____

_____

_____

COMMENTS: _____

_____

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_____

FAX OR E-MAIL THIS SHEET TO STEW ERISMAN IMMEDIATELY.

FAX #: 937-278-4633 E-MAIL: serisman1@aol.com

PLEASE CALL HIM AT 937-837-8122 TO ADVISE HIM OF ANY COMMUNICATION SENT.