

Football Game Evaluation Sheet

Home Team: _____

Date: _____

| Penalty | 1st Half | 2nd Half | |
|--------------------------|----------|----------|-------------------|
| Blocking Below Waist | | | Coach's Comments: |
| Intentional Face Mask | | | |
| Roughing (Passer/Kicker) | | | |
| Spearing | | | |
| Unsportsmanlike Conduct | | | Coach's Signature |
| Objectionable Conduct | | | |
| Other - | | | Ref's Signature |
| Other - | | | |

Visiting Team: _____

| Penalty | 1st Half | 2nd Half | |
|--------------------------|----------|----------|-------------------|
| Blocking Below Waist | | | Coach's Comments: |
| Intentional Face Mask | | | |
| Roughing (Passer/Kicker) | | | |
| Spearing | | | |
| Unsportsmanlike Conduct | | | Coach's Signature |
| Objectionable Conduct | | | |
| Other - | | | Ref's Signature |
| Other - | | | |

Referee's Comments

Additional Coach's Comments

- Scorer - Please record the number of the player(s) charged with an infraction. If you are unsure of the number please ask the referee for clarification at the soonest possible moment.
- Both teams are permitted to have a school representative scoring the game. In the event of a disagreement, please record it on the back of this sheet and the football commissioner will rule on it.
- Please fax this game sheet to the RVS Sports Coordinator at 403-945-4011.