

HOMENETMEN GAME REPORT

Game reports to be completed by the Ararat Basketball representative & a copy must be submitted, mailed, emailed or faxed to Athletic office within 36 hours after game.

Game Date _____ Game Time _____ AM / PM
Ararat Team _____ Half Score _____ Final Score _____
Opponent Team _____ Half Score _____ Final Score _____
RAC Representative Name: _____
Referee(s) Name (s): 1) _____ 2) _____
Scorer's Name: _____
Game start on time? Yes _____ No _____

Cooperation and Ability of Referee: Good _____ Average _____ Poor _____
Cooperation and Ability of Scorer: Good _____ Average _____ Poor _____
Conduct and Sportsmanship of Crowd: Good _____ Average _____ Poor _____

ARARAT Team

Cooperation and Attitude of Players: Good _____ Average _____ Poor _____
Cooperation and Attitude of Coach: Good _____ Average _____ Poor _____
Conduct of Bench and Team Attendants: Good _____ Average _____ Poor _____
Compliance of G-E-F Division Mandatory 8 minutes playing rule: Yes _____ No _____

OPPONENET Team

Cooperation and Attitude of Players: Good _____ Average _____ Poor _____
Cooperation and Attitude of Coach: Good _____ Average _____ Poor _____
Conduct and Bench and Team Attendants: Good _____ Average _____ Poor _____

Any technical fouls called? YES _____ NO _____
Any intentional personal fouls called? YES _____ NO _____
Any players ejected from the game? YES _____ NO _____
Ejected for fighting? _____
No. of Player (s) _____

If the answers are "NO" or "POOR" to any of the following questions, explain in detail on the reverse side of the report form.

Comments: *(Use reversed side of form if additional space is needed.)*

Name: _____ Signed: _____